

Bill No : 23065
Date / Time : 01-01-2024
Patient Name : Aneesh
Contact No : +91
Doctor Name : SUT Hospital
Customer Name :
Customer GSTIN :



ASWAS COMMUNITY PHARMACY
AFF.PHARMACIST~S WELFARE SOCIETY
REG.NO.T3036.07
AP10.493 NEAR PUBLIC
MARKET,ALUMOODU,KANIYAPURAM

Branch : ALUMOODU
Tel No : 9061097470
DL No : KL-TVM 133127
DL No : KL-TVM 133128
GSTIN : 32ABLFA5112D1Z3
Division : ALUMOODU

SL NO	HSN CODE	PRODUCT NAME	MFR	BATCH	EXP DT	QTY	MRP	DISC %	RATE	GST %	AMOUNT
1	45784125	Coversyl Tab. 8mg	SERD	2304	04/25	30	22.63	15	19.23	12	576.99
2	45784125	Ecosprin Tab. 150mg	USV	4009702	06/25	30	0.78	15	0.67	12	20.00
3	45784125	Fibator Tab. 10mg	SUN	1566A	06/25	30	24.40	15	20.74	12	622.20
4	45784125	Levipil Tab. 500mg	SUN	2487A	08/25	60	14.43	15	12.27	12	736.03
5	45784125	Metolar XR 50 Cap.	CIPL	BA30876	02/25	30	7.89	15	6.70	12	201.08
6	45784125	Tetrafol Plus Tab.	SUN	1371A	07/25	30	23.50	15	19.98	12	599.25
7	45784125	Torglip 50.500 Mg	TORR	2KY8K011	05/25	60	9.15	15	7.78	12	466.65

FSSAI NO :	9022119922	TOTAL	270	3,790.80
Taxable Amount :2,877.00 SGST : 173.00 CGST : 173.00 IGST : 0.00 Non Taxable Amount : 0.00				

Three Thousand and Two Hundreds Twenty Two	Grand Total	3,222.20
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You have saved : Rs 568.60

Note		For Pharmacist
1. Reverse tax mechanism on items are not applicable. Exchange within 7 days from the date of purchase original bill mandatory for exchange of products	Image not found or type unknown payment QR	
Items requiring cold storage will not be returned or exchanged		