

JAI AMBE MAA

PHARMA LINKS AGENCIES

275,'P SQUARE' GF 1ST, 2ND, 3RD FLOOR 1ST MAIN ROAD
 CHAMARAJPET ALBERT VICTOR ROAD BANGALORE-560018
 Ph.No.- 080-6960 9999, 49785111/222, 41222713/41514999
 DL.No: 20B:KA-B21-209422, 21B:KA-B21-209423
 GSTIN.No. :29ABAFP4994P1Z9 FOOD LICENSE:11221332001011
 E-Mail : plabng@gmail.com

BALAJI MEDICAL

47/79/4 NO.7A OPP VICTORIA HOSPITAL,MAIN GATE,K.R.ROAD
 BANGALORE,Karnataka-560002
 PHONE : 9972754242
 D.L. No. : 123456
 GSTIN. : 29ANZPH0279G1ZF

Order No. : 220
Date : 25-07-2023

Rep :
 Bill Time : 11:41
 Prepared By :
 Printed By :
 Print D&T : 25-07-2023 11:41

COMP/MFR.	QTY	FREE	PACK	BOX	PRODUCT	BATCH	EXP	MRP	RATE	DIS%	HSN	GST Type	AMOUNT
CADIL / CADIL	25	0	VAIL	25	ORITAXIM 500MG INJ			25.51	14.73	0.00	30042019	GST12%	368.25

Taxable: 368.25 CGST 6% : 22.10 SGST 6% : 22.10		Bank Details				Outstanding				Sale Value		368.25								
		BANK NAME:- KOTAK MAHINDRA BANK BRANCH NAME:- KEMPEGOWDA ROA A/C NO/GPAY NO.: -9448992983 IFSC CODE:-KKBK0008050				Oldest 7 Outstanding Bills				GST Amount		44.20								
						<table border="1"> <thead> <tr> <th>DATE</th> <th>BILL NO.</th> <th>AMOUNT</th> <th>DAYS</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				DATE	BILL NO.	AMOUNT	DAYS					Round Off		-0.45
DATE	BILL NO.	AMOUNT	DAYS																	
Total No Of Items:- 1 Total No Of QTY:- 25						Total Value in Words:- Four Hundred And Twelve Rupees Only						Grand Total		412.00						

CHECKED BY _____ PACKED TIME/DATE _____ BATCH VERIFIED BY _____ ACCOUNTED BY _____ INV VERIFIED BY _____