## Pharmacy Management System

Student Center Ground Floor,

P.O. Box Private Bag Kabarak, Kenya Tel: +254 702 937 925

E-mail: pharmacyManagement F201tem@yahoo.com

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INVOICE Nº: 14

Thursday, January 01 1970, 01:00:00 AM

Name: soumik ID Nº: 152

Drug	Strength	Dose	Quantity	Price	Ί	Γotal
Naproxen	15 mg	1*6	6	5	50.00	300.00