

Your Pharmacy

123 Health Street, Medical City
Phone: (123) 456-7890 | care@yourpharmacy.com

SALES RECEIPT

Invoice: #INV-1745137421444-478
Date: Apr 20, 2025
Time: 01:23 PM

Cashier: Stal
Items: 10

Item	Amount
10 × NaN	NaN
Subtotal:	300.00
Tax (0%):	0.00
TOTAL: 300.00	

Payment Method: true

ID : 6804afe3c84fdff

Thank You For Your Purchase!
www.yourpharmacy.com | (123) 456-7890
Store Hours: Mon-Sat: 9AM-9PM, Sun: 10AM-6PM
* This is a computer-generated receipt and does not require a signature *