

TAX INVOICE

Frank Ross Pharmacy
<ECOSPACE,building no-2b,Rajarhat, unit no-2b001,premises no-11f/12, action area-II,P.O-New town,p.S-rajarhat, kolkata - 700156 >

DL NO. : <WB/NPG/481-S,WB/NPG/481-SB>	CIN No.: <19420653047>
VALID UPTO: <08-02-21>	VAT No.: <L24232WB1919PLC003123>
PATIENT NAME: <Sanchita Roy> ADDRESS:<Minakshi Shroff, Globe mall, 7 7E Nellie sengupta sarani, New market, New Market, Kolkata-700087.> Phone Number: <1234567890>	SHIPPING DETAILS: <Sanchita Singha Roy> <Minakshi Shroff, Globe mall, 7 7E Nellie sengupta sarani, New market, New Market, Kolkata-700087.> Phone No.: <1234567890>
ORDER ID: <234567>	DOCTOR : <Dr. V K Mitra>
INVOICE No. : <IN-234567-34567>	INVOICE DATE: <26-04-2017>

Title	Schd.	Manufacturer	Batch No.	Expiry Date	Qty	UOM	MRP	Amount

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Gross Amount	Less discounts (-)	Less Promotions (-)	Less Prepaid (-)	Net Amount	Convenience Fees (+)	Payable Amount (INR)
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Payable Amount in words: <payable amount in words>

Signature of a qualified person :

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