

Tax Invoice

Frank Ross Pharmacy

Store name

Store Address

DL No.:	CIN No.:	Valid Upto:	Vat No:
Order Id:	Invoice No.:	Invoice Date:	
Patient Name: Debayan Sen		Doctor Name: Dr. C. K. Biswas	
Billing Address: AE-302, Sector-1, Salt Lake, Kolkata-700064		Shipping Address: AE-302, Sector-1, Salt Lake, Kolkata-700064	
Pin Code: 700064		Pin Code: 700064	
Landmark: Sen Mahashaya Sweet Shop		Landmark: Sen Mahashaya Sweet Shop	
Phone No: 9674308102		Phone No: 9674308102	

<u>Items</u>	<u>Schd.</u>	<u>Mfg.</u>	<u>Batch No.</u>	<u>Exp. Date</u>	<u>Qty.</u>	<u>UOM</u>	<u>MRP</u>	<u>Amount</u>
Items	Schd.	Mfg.	Batch No.	Exp. Date	Qty.	UOM	MRP	Amount
Items	Schd.	Mfg.	Batch No.	Exp. Date	Qty.	UOM	MRP	Amount
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Items	Schd.	Mfg.	Batch No.	Exp. Date	Qty.	UOM	MRP	Amount

<u>Gross</u>	<u>Less</u>	<u>Less</u>	<u>Less</u>	<u>Net</u>	<u>Convenience</u>	<u>Payable</u>
<u>Discount (-)</u>	<u>Promotions</u>	<u>Prepaid (-)</u>	<u>Amount</u>	<u>Fees (+)</u>	<u>Amount (INR)</u>	
	<u>(-)</u>					
Mfg.	Batch No.	Exp. Date	Qty.	UOM	MRP	Amount

Payable amount in words: **Ten Thousand Fifty five only**

Signature of qualified person:.....