

Bill To	Transportation Details	Invoice Details
John Doe 123 Main St	Transport Name: N/A Delivery Date: 06-07-25 Delivery location:	Invoice No. 0001 Date: 06-07-25

#	Item name	Quantity	Rate	Discount	Amount
1	MediCure	31	25.5	10%	711.5
2	PainAway	38	12.8	80%	96.9
3	PainAway	10	12.8	6%	119.8
				Total	928.2

Amounts	
Sub Total	928.2
Total	928.2
Received	0.00
Balance	928.2

Invoice Amount in Words
Nine Hundred And Twenty-Eight and Twenty Paise Only

Terms and Conditions	
Form 2-A, as specified under Rules 19 and 30, pertains to the warranty provided under Section 23(1)(1) of the Drug Act 1976. This document, issued by Tru_pharma, serves as an assurance of the quality and effectiveness of their products. The warranty ensures that the drugs manufactured by Tru_pharma comply with the prescribed standards and meet the necessary regulatory requirements. By utilizing Form 2-A, Tru_pharma demonstrates its commitment to delivering safe and reliable pharmaceuticals to consumers. This form acts as a legal document, emphasizing Tru_pharma's responsibility and accountability in maintaining the highest standards in drug manufacturing and distribution.	

For : Tru_Pharma

Authorized Signatory