

INVOICE

| Id |  | P Code | Product           | Rate  | Quantity | Amount |
|----|--|--------|-------------------|-------|----------|--------|
| 1  |  | Gel    | Hexilak ultra Gel | 765.0 | 1        | 765.0  |
| 2  |  | Cream  | Lapcort           | 125.0 | 1        | 125.0  |
| 3  |  | Cream  | Kojishine         | 329.0 | 1        | 329.0  |
| 4  |  | Cream  | Facemoist         | 495.0 | 1        | 495.0  |
| 5  |  | Tablet | Ozidox            | 10.0  | 10       | 100.0  |

Bill Amount 1814.0