

TAX INVOICE

GST123456Z

VIS-20230104-001

VISIT DATE/TIME : 04-JAN-2023 12:23PM

BILL DATE : 04-JAN-2023

INV-20230104-001

PAY BY : SELF

PATIENT ID NO. : [REDACTED]

JOHN DOE

123 SAMPLE ST #01-01

DESCRIPTION	QTY	S\$	S\$
CONSULTATION			26.00
PHARMACEUTICAL			
DEXTROMETHORPHAN 15MG/5ML SYR	90.0	5.47	
TROTIPRONT MAX LOZENGES	8.0	3.16	
			8.63
PRACTICE COST			
PRACTICE COST	1.0	11.00	
			11.00
SUB-TOTAL			45.63
TOTAL CHARGES BEFORE GST			45.63
GST @ 8%			3.65
TOTAL CHARGES AFTER GST			49.28
LESS ROUNDING ADJUSTMENT			(0.03)
TOTAL AMOUNT PAID			(49.25)
VISA ****1234			
TOTAL BALANCE DUE			0.00

RafflesMedical

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