

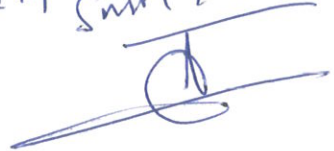


## Tax Invoice

	<b>SHREE MEDICAL STORE</b> SIKANDERPUR BADHA SECTOR 84 Phone no.: 9999401121 Email: jeetyadav0121@gmail.com				
<b>Bill To</b>					
<b>KRISUMI CORPORATION PVT. LTD.</b> KRISUMI SECTOR 36A GURGAON State: 06-Haryana	Place of supply: 06-Haryana <b>Invoice No. : 78</b> <b>Date : 26-08-2023</b>				
#	Item name	Quantity	Unit	Price/ Unit	Amount
1	✓ dolo 650	1	STRIP	₹ 33.00	₹ 33.00
2	✓ disprin	1	STRIP	₹ 11.00	₹ 11.00
3	✓ pudin hara	1	STRIP	₹ 30.00	₹ 30.00
4	✓ digene	1	STRIP	₹ 19.00	₹ 19.00
5	✓ OMNIGEL SPRAY	1	Btl	₹ 295.00	₹ 295.00
6	✓ BANDAGE	1	Box	₹ 250.00	₹ 250.00
7	✓ sanitary pad	1	Pac	₹ 304.00	₹ 304.00
8	✓ RANTAC	1	STRIP	₹ 78.00	₹ 78.00
9	✓ OMNIGEL OINT	1	OINT	₹ 231.00	₹ 231.00
<b>Total</b>		<b>9</b>			<b>₹ 1,251.00</b>
<b>Amounts:</b>					
Sub Total					₹ 1,251.00
<b>Total</b>					<b>₹ 1,251.00</b>
Received					₹ 0.00
Balance					₹ 1,251.00
<b>Invoice Amount In Words</b>					
One Thousand Two Hundred Fifty One Rupees only					
<b>Terms and Conditions</b> Thanks for doing business with us!	 UPI SCAN TO PAY	For, SHREE MEDICAL STORE  Authorized Signatory			

Required by Smita. CRE  


GATE IN 1140  
 DATE... 26/8/23  
 KRISUMI CORPORATION