



**DR. B.R.A INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi 110029**

Printed on 22 Sep 2018 09:02:16 AM

Dept No: 218197

Receipt No: ACCOUNTS-9/30649/201819 [Original] IRCH Receipts IRCH No : 218197 UHID : 103862659
 Received From: MRS. AMITA CHAUDHARY, Age : 45 Yrs 2 Mons 11 Days DATED: 22/09/2018
 Payment By: Cash Billing Type : General

On ACCOUNT Of

SI No.	Service Name	Quantity	Rate	Net Amount
1	ADVANCE - SHORT ADMISSION	1	60	60

Payment Mode : Cash

RS.: 60.0

Rupees Sixty Only

Surender
 SENIOR RESIDENT
 MEDICAL ONCOLOGY
 DR. B.R.A., I.R.C.H. A.I.I.M.S.
 NEW DELHI-110029

MR.SURENDER IRCH

Printed on 22 Sep 2018 09:02:16 AM



Form No: 218197

CASH RECEIPT
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi-110029

Phones } 26588500
 26588700

Receipt No.:**Received From:**

ACCOUNTS-18/137922/201819

OPD/ MRD No.:

Original IRCH Receipts

ON ACCOUNT OF

MRS. AMITA CHAUDHARY, Age : 45 Yrs 3 Mons 2

Days

103562659 (OPD)

**Dated :**

13/10/18

Patient Type :

General

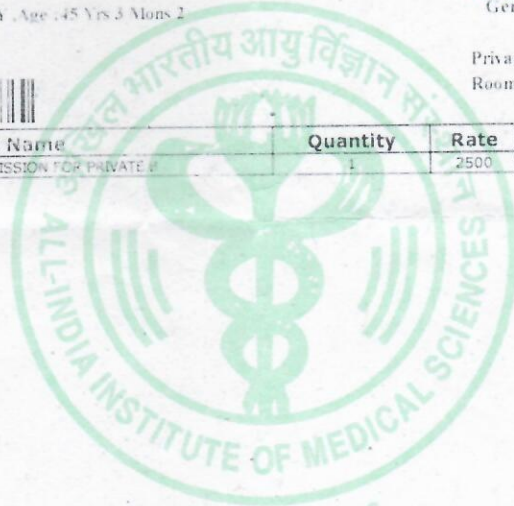
Room No. :

Private -B

Room No.308

Sl No.	Service Name	Quantity	Rate	Net Amount
1	ADVANCE - SHORT ADMISSION FOR PRIVATE #	1	2500	2500

Printed on 13 Oct 2018 13:56:43 PM



शरीरमाद्यं खलु धर्मसाधनम्

Payment Mode:**INR (Rs.) :****Rs. in Words**

Cash

2500.0

Rupees Two Thousand Five Hundred Only

MR.PAWAN KUMAR MAINI

Received
 SENIOR RESIDENT
 MEDICAL ONCOLOGY
 DR. B.R.A., I.R.C.H. A.I.I.M.S.
 NEW DELHI-110029

GST INVOICE/CASH MEMO

RAJDHANI PHARMACEUTICALS

Chemist & Druggist,

52/1-2, BASEMENT YUSUF SARAI,

NEW DELHI-110016

Phone : 9250123665, 9013858927

D.L.No. : S(1826)14 R/W

GST No. : 07AARFR3582R1Z9

Inv.No. : RT-0021867 DATE : 13/10/2018
 Name: ANITA
 Add.: IRCH/308
 Dr. : AIIMS
 Reg. :

QTY.	PACK	PARTICULARS	M.R.P.	BATCH	EXP	GST %	RATE	DIS	AMOUNT
60.000	1*10	a CACIT 500MG TAB	1328.58	CPTD18B30A	3/20	12.0	30.00	0.00	1800.00
25.000	1*10	a CACIT 500MG TAB	1328.58	CPTD18B30A	3/20	12.0	9.00	0.00	90.00
10.000	10	a EMESET 8MG TAB	102.59	GGG997	3/21	12.0	0.67	0.00	20.00
30.000	30	a RANITAC 150MG TAB	22.05	KR38018	12/19	12.0	5.50	0.00	55.00
10.000	10TAB	b AURADEX 8MG TAB	60.00	T-24	3/20	12.0			

HSN-3-3004, 3-0802 661-2424, 14665=145, 458831+145, 458831,

Rs. Two Thousand Seven Hundred Fifteen Only

All disputes subject to DELHI Jurisdiction only
 Medicines without Batch No. & Exp.
 will not be taken back.

Dr. B. R. A.
SENIOR RESIDENT
MEDICAL ONCOLOGY
DR. B.R.A. I.R.C.H. A.I.I.M.S.
NEW DELHI-110029

PLEASE PAY = 2715.00

for RAJDHANI PHARMACEUTICALS

डा० बी० आर० अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
DR. B. R. AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL

अखिल भारतीय आयुर्विज्ञान संस्थान
ALL INDIA INSTITUTE OF MEDICAL SCIENCES

रोगी का नाम
Name of the Patient

Amifa

Clinic No.

I.R.C.H. No.

क्र० सं०
Sl. No.

अपेक्षित मात्रा
Qty. Reqd.

क्र० सं० Sl. No.	रोगी का नाम Name of the Patient	अपेक्षित मात्रा Qty. Reqd.
1.	Syringe Inj Emecet 5mg ①	NS 100ml - glass bottle - ②
2.	Inj Dexa 5mg ①	5% Dextrose 500ml - ①
3.	Inj Rontar 5mg ①	Wset - ①
4.	Inj Oxalyptin 20mg	W cannula 22G - ②
5.	Syringe 10ml ①	Regadem - ②
6.	Syringe 10ml ①	चिकित्सा अधिकारी के हस्ताक्षर Signature of the Medical Officer
		Needle 16 G - ②

प्राप्त किया (रोगी के हस्ताक्षर)
Received (Signature of Patient)

[Signature]



CASH RECEIPT
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi-110029

Phones } **26588500**
 } **26588700**

Receipt No.:

ACCOUNTS-18/151520/201819

03/11/2018

Dated :

Received From:

(Original)IRCH Receipts

Patient Type :

OPD/ MRD No.:

MRS. AMITA CHAUDHARY .Age :45 Yrs 3 Mons 23

General

Room No. :

ON ACCOUNT OF

Days

103802659 (OPD)



Sl No

Service Name

Quantity

Rate

Net Amount

ADVANCE - SHORT ADMISSION FOR PRIVATE R

1

2500

2500

Printed on 03 Nov 2018 14:55:20 PM



Amrita
SENIOR RESIDENT
MEDICAL ONCOLOGY
DR. B.R.A., I.R.C.H. A.I.I.M.S.
NEW DELHI-110029

Cash

2500.00

Rupees Two Thousand Five Hundred Only

MR VARUN VATS

Payment Mode:

INR (Rs.) :

Rs. in Words

JAI KALKA MAI

GSTIN : 07AAAF1757N125

D.L. No.: 13(1479) 20, 21 & 20C

GST INVOICE

+ INDER MEDICOS +

P-3, NDMC MARKET, YUSUF SARAI, NEW DELHI-110 029

MEDICINES, SURGICALS & COSMETICS (RETAIL & WHOLESALE)

E-mail : indermedicosys@gmail.com

CREDIT CARD
ACCEPTED

ALL DAYS
OPEN

46665307, 46665308, 46665309, 9811081797, 9810874003

* In case you find any inadvertent error in the price charged.
* Please bring this GST invoice for refund of difference.

Printed by : Antartex Continuous Forms # 981114510, 9136443320

QTY.	PARTICULARS	BATCH NO.	EXP. DT.	GST	AMOUNT
90	CAPODA 500MG-TAB	418-1185	05/20	12.0	3600.00
10	RANTAC-150MG TAB.	KR38161	05/20	12.0	7.73
8	DEXAM-8MG TAB	4039	03/20	12.0	56.00
4	IMODIUM-CAP.	N292	05/21	12.0	14.95
10	EMESET-8MG TABS.	6670542.	02/20	12.0	95.13

NEWDL. NO: --20 (MEH-118308)
21 (MEH-118309)

DO ONE GOOD ACT A DAY

Received

SENIOR RESIDENT
MEDICAL ONCOLOGY
DR. B.R.A., I.R.C.H. A.I.I.M.S.
NEW DELHI-110029

BILL NO.: 58827 DATE: 03/11/18

PATIENT Ms/Mr.: AMITA CHAUDHARY
ADDRESS:

Pres. by Dr.: AIIMS SAHIL
Sign. **Grand Total**

Total 913.64
CGST 153.23
SGST 153.23

2,860.00

1. No Return, No Exchange
2. All Disputes are subject to Delhi Jurisdiction only.

E & O.E

ANTAR FORMS AF

JAI KALKA MAI

D.L. No.: 13(1419)z0, 21 & 20C

GST INVOICE

GSTIN : 07AAAF1757N125

+ INDER MEDICOS +

P-3, NDMC MARKET, YUSUF SARAI, NEW DELHI-110 029

CREDIT CARD
ACCEPTED

MEDICINES, SURGICALS & COSMETICS (RETAIL & WHOLESALE)

ALL DAYS
OPEN

E-mail : indermedicosys@gmail.com

☎ **46665307, 46665308, 46665309, 9811081797, 9810874003** 📞

★ In case you find any inadvertent error in the price charged.
★ Please bring this GST invoice for refund of difference.

AMTAL FORMS
AF

QTY.	PARTICULARS	BATCH NO.	EXP DT.	GST	AMOUNT
2	XALIPAT-100MG INJ.	IXPB70705	06/19	12.0	4000.00
2	SODIUM CHLORIDE-100ML (G	AB0039	03/21	12.0	36.92
2	VENEPORT-22G CANNULA	1505579	04/20	12.0	320.00
1	EMESET-4ML/8MG INJ.	A070736	11/20	12.0	23.79
1	DEXRA-2ML INJ.	Q1-0444	03/20	12.0	9.59
1	RANFORD INJ.	P3L1837	05/20	12.0	2.95
1	DEXTROSE-5%/500ML (GLASS)	ABC011	02/21	12.0	38.81
1	SYRINGE+NEEDLR-20' ML ROM	33081-ROMD	05/22	12.0	20.50
1	TRANSFLOW	33745	07/22	12.0	149.00
2	SYRINGE+NEEDLE-10' ML ROM	33062-ROMD	07/22	12.0	22.00
2	SYRINGE+NEEDLE-5' ML ROMD	34500-ROMD	08/23	12.0	14.00
2	TEGADERM-DRES.6*7CM.	R051B0905.	04/21	12.0	144.00

NEWDL. NO: --20 (MEH-118308)
21 (MEH-118309)

DO ONE GOOD ACT A DAY

BILL NO.: 58824 DATE: 03/11/18

PATIENT Ms/Mr.: AMITA CHAUDHARY

ADDRESS:

Pres. by Dr.: AIIMS SAHIL

Sign. **Grand Total**

2,500.00

1. No Return, No Exchange
2. All Disputes are subject to Delhi Jurisdiction only.

Receipt
SENIOR RESIDENT
MEDICAL ONCOLOGY
DR. B.R.A., I.R.C.H.A. AIIMS
NEW DELHI-110029

Total 133.92
CGST 133.92
SGST

Printed by : Anandaf Continous Forms # 981114510, 9136443320

FO&I

डा० बी० आर० अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
DR. B. R. AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL

अखिल भारतीय आयुर्विज्ञान संस्थान
ALL INDIA INSTITUTE OF MEDICAL SCIENCES

रोगी का नाम
 Name of the Patient

Amba Chandhary Pvt/308

Clinic No.

I.R.C.H. No. 311/5

क्र० सं०
 Sl. No.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Inj. Emset 8mg - (1)	1/2 cannule 22G - (2)
Inj. Dexam 8mg - (1)	Tegaderm - (2)
Inj. Romfac 5mg - (1)	Syringe 20ml - (1)
	10ml - (2)
	5ml - (2)
Inj. Oxaliplatin - 200mg	
S/O 500ml - (1)	glass bottle
100mls - (2)	
	Yrset - (1)

प्राप्त किया (रोगी के हस्ताक्षर)
 Received (Signature of Patient)

चिकित्सा अधिकारी के हस्ताक्षर
 Signature of the Medical Officer

DURGA MEDICOSE

KIOSK NO. 55, SAFDARJUNG HOSPITAL, GATE NO. 2, NEW DELHI-29, Ph.: 011-26168992

Bill No. : 275782 **GST INVOICE** **Date :** 24/11/18
Patient : AMITA CHAUDHARY **Time :** 07:52 PM
Address : MG
Prescribed by : AIIMS

QTY.	PARTICULARS	HSN	GST%	BATCH	EXPIRY	AMOUNT
80	CAPUDA 500	30049079	12.0	418-1185	05/20	4000.00
10	RANTAC-150MG TAB.	30049033	12.0	KR38163	05/20	7.73
10	AURADEX 8MG TAB.	00002106	12.0	T-24	03/20	60.00
10	EMESET-8MG TABS	30049035	12.0	6880539	02/21	102.59

D.L.NO.:S(1991) 15R

Receipt

Taxable 5%	0.00	CGST 2.5%	0.00	SGST 1.5%	0.00
Taxable 12%	3.723.50	CGST 6%	223.41	SGST 6%	223.41
Taxable 18%	0.00	CGST 9%	0.00	SGST 9%	0.00
Taxable 28%	0.00	CGST 14%	0.00	SGST 14%	0.00
Taxfree %	0.00	CGST 0%	0.00	SGST 0%	0.00
CGST Total	223.41			MRP TOTAL	4.170.32
SGST Total	223.41			DIS. AMT.	
Order:- SATISH				PAID AMT.	4.170.00

SENIOR RESIDENT
 MEDICAL ONCOLOGY
 DR. B. K. GUPTA, C.H. A.I.I.M.S.
 NEW DELHI-110029

GSTIN : 07ABPPK4453M1Z4 D.L. No.: S (1991) 15R
 Note : Cutting strips & fridge items (without ice) will not be returned
 Medicine will not return after Ten Days

FOR : DURGA MEDICOSE

INDIAN PAPERS Ph: 26274765-26274766



Dept No: 218197

CASH RECEIPT
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi-110029

Phones } **26588500**
26588700

Receipt No.:**Received From:****OPD/ MRD No.:****ON ACCOUNT OF**

ACCOUNTS-18/163848/201819

[Original]IRCH Receipts

MRS. AMITA CHAUDHARY ,Age :45 Yrs 4 Mons 13

Days

103862659 (OPD)

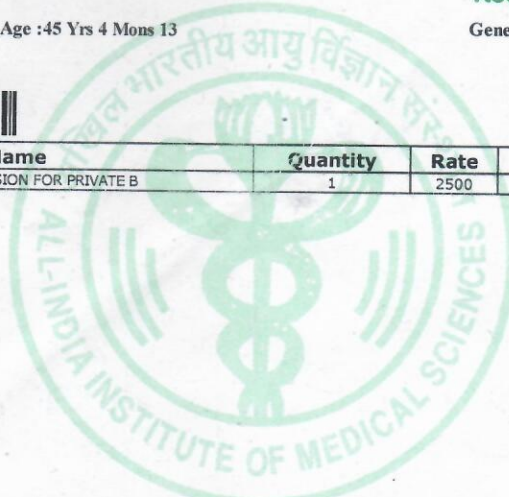
**Dated :****Patient Type :****Room No. :**

24/11/2018

General

SI No.	Service Name	Quantity	Rate	Net Amount
1	ADVANCE - SHORT ADMISSION FOR PRIVATE B	1	2500	2500

Printed on 24 Nov 2018 15:33:56 PM



शरीरमाद्यं खलु धर्मसाधनम्

Revin
 SENIOR RESIDENT
 MEDICAL ONCOLOGY
 DR. B.R.A., I.R.C.H. A.I.I.M.S.
 NEW DELHI-110029

Payment Mode:**INR (Rs.) :****Rs. in Words**

Cash

2500.0

Rupees Two Thousand Five Hundred Only

MR.TUSHAR SINGLE WINDOWS

GST INVOICE/CASH MEMO

RAJDHANI PHARMACEUTICALS

Chemist & Druggist,
52/1-2, BASEMENT YUSUF SARAI,
NEW DELHI-110016
Phone : 01141841674, 9013858927
D.L.No. : S(1826)14 R/W
GST No. : 07AARFR3582R1Z4

Inv.No. : **KT-0027687** DATE : 24/11/2018
Name: ANITA CHOUDHAREY
Add.: IRCH

Dr. : AIIMS

QTY.	PACK	PARTICULARS	M.R.P.	BATCH	EXP	GST %	RATE	DIS	AMOUNT
1.000	4ML	a EMESET 8MG INJ	23.79	A07049035	7/20	12.0	20.00	0.00	20.00
1.000	1	b DEXRA 2ML INJ	9.59	01-02992	11/19	12.0	9.00	0.00	9.00
2.000	1	c OXALTERD 100MG INJ	3800.00	HHBL801DP	12/19	12.0	850.00	0.00	1700.0
1.000	1	d ROMJET SYRINGS 20	16.00	819204NTH1	4/23	12.0	12.00	0.00	12.00
2.000	1	d ROMJET SYRINGS 10	11.00	G33289	5/22	12.0	5.00	0.00	10.00
2.000	1UNIT	c NS 100ML GLASS(DEN	18.45	1809041064	9/21	12.0	15.00	0.00	30.00
1.000	540ML	a DEXTROSE 5% 540ML (37.15	ABL013	8/21	12.0	30.00	0.00	30.00
1.000	1PC	d I.V SET VENTED (RD	115.00	G33556	6/22	12.0	30.00	0.00	30.00
2.000	1*1PC	d INT.IV CANNULA 22G	105.00	18042599	3/23	12.0	30.00	0.00	60.00
2.000	1PC	e TEGADERM (1623M)	60.00	R12170906	11/22	12.0	45.00	0.00	90.00
2.000	1	c NEEDLE 16G (ROMSON	4.00	G33560	11/22	12.0	3.00	0.00	6.00
2.000	1	f PROFFLY GLOVES 7.0	54.00	010118	12/21	12.0	20.00	0.00	40.00

Receipt

HSN->a-3004,b-3003,c-0802,d-9018,e-3003,f-4013,gst-71818,7483+62-109,1256ST+109,1256ST.

PLEASE PAY TO THE ORDER OF
MEDICAL ONCOLOGISTS
DR. B.R.A., I.R.C.H. AIIMS
NEW RAJDHANI PHARMACEUTICALS

Rs. Two Thousand Thirty Seven Only

*All disputes subject to DELHI Jurisdiction only
*Medicines without Batch No.& Exp. will not be taken back.

*Please consult Dr. Before using the medicines

Our GST Billing Software MARG Era 011-26488791, 46658600, 794269260

Our Billing Software HARG Erg 011-26488701,46658600,7042626260

RAJDHANI PHARMACEUTICALS

Chemist & Druggist.

52/1-2, BASEMENT YUSUF SARAI,

NEW DELHI-110016

Phone : 01141841674,9013858927,9212339525

D.L.No. : 501826114 R/W

GST No. : 07AARFR3582K1Z4

Inv.No. : RT-0030650
 Name: AMITA CHAUDHRAY
 Add.: IRCH

DATE : 15/12/2018

Dr. : AIIMS

Reg.:

QTY.	PACK	PARTICULARS	M.R.P.	BATCH	EXP	GST %	RATE	DIS	AMOUNT
1.000	4ML	a EMESET 8MG INJ	24.60	L680106	6/20	12.0	20.00	0.00	20.00
1.000	1	b DEXRA 2ML INJ	9.59	01-02992	11/19	12.0	9.00	0.00	9.00
2.000	1UNIT	c NS 100ML GLASS(DEN	18.45	1809041065	9/21	12.0	15.00	0.00	30.00
1.000	1*500M	c DEXTROSE 5% 500ML	37.16	1809004036	9/20	12.0	30.00	0.00	30.00
1.000	1PC	d I.V SET VENTED (RO	115.00	633556	6/22	12.0	30.00	0.00	30.00
2.000	1*1PC	d INT.IV CANULA 22G	126.00	618062481	5/23	12.0	45.00	0.00	90.00
1.000	1PC	e TEGADERM (1623M)	72.00	R0514180904	4/20	12.0	40.00	0.00	40.00
1.000	1	d ROMOJET SYRINGES 20	16.00	636131	10/22	12.0	12.00	0.00	12.00
2.000	1*	d NEEDLE 18G(ROMSONS	3.00	632770	4/22	12.0	3.00	0.00	6.00
5.000	1PAIR	f SURGICARE GLOVES 6	65.00	18E2076M	4/23	12.0	20.00	0.00	100.00
1.000	1	c OXALTERO 100MG INJ	3800.00	HHBL8010P	12/19	12.0	850.00	0.00	850.00
1.000	1	c OXALTERO 50MG INJ	1970.00	HHBL8030P	12/19	12.0	550.00	0.00	550.00
1.000	1*100M	c ALEX SF SYRUP	99.00	11180478	8/19	12.0	90.00	0.00	90.00

HSN->3004,4-3003,c-0802,d-9018,e-3005,f-4015 GST->1658,0434+52=99,485551+99,485551

Rs. One Thousand Eight Hundred Fifty Seven Only

PLEASE PAY = 1857.00

*All disputes subject to DELHI Jurisdiction only
 *Medicines without Batch No.& Exp. will not be taken back.

*Please consult Dr.Before using the medicines

Our GST Billing Software HARG Erg 011-26488701,46658600,7042626260 E & O.E.

Review
 SENIOR RESIDENT
 MEDICAL ONCOLOGY
 DR. B.P.A. I.R.C.H. AIIMS
 NEW DELHI-110029 RAJDHANI PHARMACEUTICALS

डा० बी० आर० अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
DR. B. R. AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL

अखिल भारतीय आयुर्विज्ञान संस्थान

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

15/12/18

रोगी का नाम *Anita Chandra,*
Name of the Patient

→ 1.4 set - ①

Clinic No.

I.R.C.H. No.

क्र० सं०
Sl. No.

→ Cannula 22 G - ②

अपेक्षित मात्रा
Qty. Reqd.

1. *inv. emset 8 mg - ①*

→ Tegaderm - ①

2. *inv. 2mg 8 mg - ①*

→ Syringe 20 ml - ①

3. ~~*inv. 2mg 10*~~

→ Needle 18 G - ②

4. *100 ml (glass) - ②*

→ gloves 7 - ⑤

5. *51. D 500 ml (glass) - ①*

6. *51. D 500 ml (glass) - ①*

प्राप्त किया (रोगी के हस्ताक्षर)
Received (Signature of Patient)

चिकित्सा अधिकारी के हस्ताक्षर
Signature of the Medical Officer

GST INVOICE

Page No: 1 of 1

Pioneer Medicos

CHEMISTS & DRUGGIST

Shop No. S/52, Gate No-2, Safdarjung Hospital,
New Delhi - 110029 Ph. 011-26175037

GST No: 07AAAFP4287A1ZI

D.L. No.: S(1119)13-R

CASH MEMO NO 154032

DATE: 15/12/2018

NAME: AMITA CHAUDHARY

Pr. By: Dr. Pr. By: Dr. AIIMS

ADDRESS:

S.NO	QTY.	PACK	DESCRIPTION	BATCH	EXP.	GST%	RATE	AMOUNT
1	40	10	CAPODA 500MG TAB	418-1185	05/20	12.0	450.00	1800.0
2	20	1*10	EMESET 8MG TAB	6681006	04/21	12.0	102.59	205.1
3	10	1*30	RAHTAC 150 MG TAB	DR38256	07/20	12.0	23.18	7.7
4	10	1*10	REDEXA 4MG TAB	ULT-17205	10/19	12.0	60.00	60.0

Reeya

LIC.NO 20 117588 LIC.NO.21 117588

INCL. GST DETAILS :

Medicines once sold, kept in refrigerator will not be taken back

SENIOR RESIDENT
MEDICAL ONCOLOGY
DR. P. R. A., I.R.C.H. A.I.I.M.S.
NEW DELHI 110029

TOTAL AMT 2072.91
LESS DIS : 2073.00
NET AMT. (R/O) :

All disputes are subject to Delhi Jurisdiction.
Prices of Medicines are inclusive of all taxes.
Goods once purchased can be returned in 30
days after 2 p.m with sale original bill
E. & O.E.

AJEET
for PIONEER MEDICOS

(Computer Generated Invoice)

Printed By: CONTINENTAL FORMS (P) LTD. Ph: 9811023143, info@continentalforms.in



CASH RECEIPT
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi-110029

Phones } 26588500
26588700

Receipt No.:

Received From:

OPD/ MRD No.:

ON ACCOUNT OF

ACCOUNTS-18/178395/201819

15/12/2018

(Original)IRCH Receipts

Dated :

Patient Type :

Room No. :

MRS. AMITA CHAUDHARY, Age :45 Yrs 5 Mous 4

General

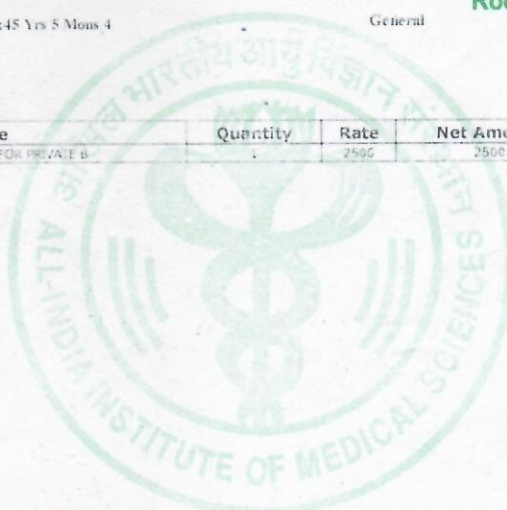
Days

103862650 (OPD)



Sl No.	Service Name	Quantity	Rate	Net Amount
1	ADVANCE SHORT ADMISSION FOR PRIVATE B		2500	2500

Printed on 15 Dec 2018 17:59:18 PM



शरीरमाद्यं खलु धर्मसाधनम्

Varun
SENIOR RESIDENT
MEDICAL ONCOLOGY
DR. B.R.A., I.R.C.H. A.I.I.M.S.
NEW DELHI-110029

Cash

2500.0

Rupees Two Thousand Five Hundred Only

MR VARUN VATS

Payment Mode:

INR (Rs.) :

Rs. in Words

GST INVOICE

Pioneer Medicos

Page No: 1 of 1

CHEMISTS & DRUGGIST

Shop No. S/52, Gate No-2, Safdarjung Hospital,
New Delhi - 110029 Ph. 011-26175037

GST No: 07AAAFP4287A1ZI

D.L. No.: S(1119)13-R

CASH MEMO NO

NAME : 156156

DATE :

Pr. By : Dr. 01/12/2018

ADDRESS : AMIT CHAUDHARY

Pr. By: Dr. AIIMS

S.NO	QTY.	PACK	DESCRIPTION	BATCH	EXP.	GST%	RATE	AMOUNT
40	10		CAPODA 500MG TAB	418-1185	05/20	12.0	450.00	1800.0

Pioneer Medicos
CASH PAID

Reviya

Printed By : CONTINENTAL FORMS (P) LTD. Ph. : 9811023143, info@continentalforms.in

IC.NO 20 117588 LIC.NO.21 117588 SENIOR RESIDENT

INCL. GST DETAILS : CGST MEDICAL ONCOLOGY

Medicines once sold. kept in refrigerator will not be taken back SGST DR: B.R.A., I.R.C.H., A.I.I.M.S.

TOTAL AMT: NEW DELHI-110029

LESS DIS: 1800.00

NET Amt. (R/O): 1800.00

All disputes are subject to Delhi Jurisdiction.
Prices of Medicines are inclusive of all taxes.
Goods once purchased can be returned in 30
days after 2 p.m with sale original bill
E.& O.E.

SHAMS
for PIONEER MEDICOS

(Computer Generated Invoice)



**DR. B.R.A INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi 110029**

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Dept No: 218197

Receipt No: ACCOUNTS-9/57096/201819 [Original] IRCH Receipts IRCH No : 218197 UHID : 103862659
 Received From: MRS. AMITA CHAUDHARY ,Age : 45 Yrs 7 Mons 7 Days DATED: 18/02/2019
 Payment By: Cash Billing Type : General

On ACCOUNT OF

SI No.	Service Name	Quantity	Rate	Net Amount
1	ADVANCE - SHORT ADMISSION FOR PRIVATE B	1	2500	2500

Payment Mode : Cash

RS.: 2500.0

Rupees Two Thousand Five Hundred Only

Reena
 SENIOR RESIDENT
 MEDICAL ONCOLOGY
 DR. B.R.A., I.R.C.H. A.I.I.M.S.
 NEW DELHI 110029

MR. LALIT IRCH
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