Vinita HOSPITAL
NABH CERTIFIED

GST : 33AADCV0902G1ZU

DL No : TN-02-20-00181, TN-02-21-00181

HR No : 026463

Name : Mrs. SAROJINI C.

Age & Sex : 68Y & Female

Mobile No : 9884437513

Doctor : Dr. Roshini S

OPD CASH BILL

Bill No : HSI148609

Date & Time : 14-11-2026 & 01:11:19 pm

S.No	Product Name	HSN Code	Batch No	Expiry Date	Schedule	Qty	MRP	GST %	Amount
1	* NEUROBION FORTE (Thiamine + Ribofalvine + Pyridoxine + Cyanocobalamin + Calcium Pentothenate) 10mg+10mg +3mg +15mcg+ 45mg +50mg TAB - Proct	3004	6238C84301	01-2028	Non Schedule	30	1.58	5.00	47.40
2	* SEMI RECLIMET (GLICLAZIDE +METFORMIN) 40 mg+500 mg TAB - Dr. R	30049099	V2601387	04-2028	Schedule H	60	9.10	5.00	546.00
	CGST (2.5%) : **Rs.14.13** **SGST (2.5%)** : **Rs.14.13**						**Total Amount**		593.40
							Bill Amount		**593.00**

Mode of Payment : Cash : Rs. 593.00

CARE WITH A HUMAN TOUCH

Signature

E & O,E goods once sold cannot be taken back or exchanged.
INSULINS & VACCINES will not be taken BACK

This is a system-generated bill. Therefore, no seal or signature is required.

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A unit of Vijay Ganga Speciality Care Pvt. Ltd.