

DL No. 2869-OB

जय राजिन्द्रानंद

CASH MEMO

GSTIN : 06AAEPL5080H1ZS

# GARRAY MEDICOSE

OPP. CIVIL HOSPITAL, DELHI ROAD, SONEPAT-131001

S.No. 10303

Dated... 14-10-23

Name of Prescriber	Qty.	Particulars of Medicine	Name of Mfg	Batch No.	Expiry	Rs.	AMOUNT P.
<p><i>Self</i></p> <p>Name &amp; Address of Purchaser</p> <p><i>D.C.D.C</i></p> <p><i>SNB</i></p>	<i>1/10</i>	<i>575 Deltac</i>	<i>R-2</i>	<i>528</i>	<i>9/25</i>	<i>99</i>	<i>00</i>

Sig. of Qualified Person

*BC*  
*99-00*

BU...  
M...  
N...