

Sold By: Demo Hospital

55-A5, h839

GST NO: dfs

PAN NO: s

**Tax Invoice****Billing Address:**

Demo Patient

1

Email: imafreenansari1988@gmail.com

Ph NO: 9654737358

Invoice No: DEM_H_26-27_3**Invoice Date:** 2026-04-18**Place of Supply:** AP-37

SI	ITEM DESCRIPTION	HSN/SAC	QTY	MRP	DISC	PRICE	TAXABLE	CGST		SGST		TAX Total	TOTAL
								RATE	AMT	RATE	AMT		
1	Bed A-101 — General Ward A (5 days)		5	1300.000	0	1300.000	6500	6%	390	6%	390	780	7280
2	Consultation Fee — Dr. Doctor 1		1	12000.000	0	12000.000	12000	6%	720	6%	720	1440	13440
3	DSR		4	0.000	0	0.000	0	6%	0	6%	0	0	0
4	DSR	120	4	140.000	0	140.000	560	6%	33.6	6%	33.6	67.2	627.2

INVOICE AMOUNT IN WORDS

Twenty One Thousand Three Hundred And Forty Seven Rupees And Twenty Paise Only

GST Summary

	0%	3%	5%	12%	18%	28%
CGST+SGST	-	-	-	2287.2	-	-

Sub Total: ₹19,060.000

Total Taxable Amount: ₹19,060.000

Total Tax Amount ₹2,287.200

Rounded Off: 0

Grand Total: ₹21,347.200

Payment Method: Cash



This is a computer-generated invoice. No signature required.

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