

GSTIN : 07AAPP6291A1ZR

TAX INVOICE

Original Copy

Anil Pharma

C- 58, Rajan Babu Road,, Adarsh Nagar, Delhi-110033

Tel. : 011-41557131 email : anilpharma1997@gmail.com

Drug Licence No. : 20B-137393, 21B-137394

Invoice No. : AP/24-25/1784
 Date of Invoice : 13-11-2024
 Place of Supply : Telangana (36)
 GR/RR No. :
 PO NO. : 28551

Transport : DELHIVERY PRIVATE LIMITED
 Vehicle No. :
 Station : KHAMMAM
 E-Way Bill No. : 701476697081
 PO DATE : 07-11-2024

Billed to :
 DCDC GOVERNMENT HOSPITAL KHAMMAN
 DIALYSIS UNIT, GOVERNMENT HOSPITAL NEHRU

Shipped to :
 DCDC GOVERNMENT HOSPITAL KHAMMAN
 DIALYSIS UNIT , GOVERNMENT HOSPITAL
 NEHRU NAGAR , KHAMMAM
 TELANGANA - 507001

Party Mobile No :
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 8106326263
 GSTIN / UIN :
 D.L. No. :

KHAMMAM

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	20	0	1*50	HMD 10ML SYRING	90183100	442102JC2	Sep-2029	0.00	247.50	0.00%	12%	5,544.00

Stock/No. of Boxes Received ①
 Subject to Physical Check
 Name/Employee Code Ravindra Singh
 Centre Name Khammam
 Date/Time 13/11/24
 Signature M. No. 9901071

Total 5,544.00

20.00 0.00

Grand Total ₹ 5,544.00

Tax Rate Taxable Amt. IGST Amt. Total Tax
 12% 4,950.000 594.000 594.000

Rupees Five Thousand Five Hundred Forty Four Only**Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000335; IFSC - UJVN0002207****Terms & Conditions**

- E.& O.E.
- Goods once sold will not be taken back.
 - Interest @ 18% p.a. will be charged if the payment is not made with in the stipulated time.
 - Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :

For Anil Pharma
 AUTH. SIGN.
 Authorised Signatory
 DELHI