

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/24-25/1804  
Date of Invoice : 13-11-2024  
Place of Supply : Telangana (36)  
GR/RR No. :  
PO NO. : 28439

Transport : N/A  
Vehicle No. :  
Station : GODAVARIKHANI  
E-Way Bill No. :  
PO DATE : 07-11-2024

**Billed to :**

DCDC GOVT. GENERAL HOSPITAL GODAVARIKHAN  
DIALYSIS UNIT, GOVT. GENERAL HOSPITAL GO

**Shipped to :**

DCDC GOVT. GENERAL HOSPITAL GODAVARIKHAN  
DIALYSIS UNIT, GOVERNMENT HOSPITAL  
DIST - PEDDAPALLI , GODAVARIKHANI  
TELANGANA - 505209

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

Party Mobile No : 8500175310  
GSTIN / UIN :  
D.L. No. :

GODAVARIKHANI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	500	0		Cap	62103090			0.00	0.90	0.00%	5%	472.50
2	100	0		Vacutainer Plain	90183990			13.50	5.50	0.00%	12%	616.00
3	100	0		Edta Vacutainer	90183990			13.50	6.00	0.00%	12%	672.00
4	500	0		TRANSDUCER PROTECTOR	90183930			0.00	5.00	0.00%	12%	2,800.00
5	48	0		PAPER TAPE 2" 9.1MTR	30059060			0.00	46.60	0.00%	12%	2,505.22
6	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,085.60

Stock/No. of Boxes Received ..... 1 (Box)  
Subject to Physical Check  
Name/Employee Code .....  
Centre Name : Godavari Khani  
Date/Time ..... 18/11/20  
Signature ..... M. No. 8500175310

Total 8,151.32

Less : Rounded Off (-)

0.32

1,248.00 0.00

Grand Total ₹ 8,151.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
5%	450.000	22.500	22.500
12%	5,886.800	706.416	706.416
18%	920.000	165.600	165.600
<b>Total</b>	<b>7,256.800</b>	<b>894.516</b>	<b>894.516</b>

Rupees Eight Thousand One Hundred Fifty One Only

Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000335; IFSC - UJVN0002207

## Terms &amp; Conditions

E.&amp; O.E.

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

Receiver's Signature :

For Anil Pharma  
Authorised Signatory