

7AAPP6291A1ZR

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/24-25/1822
Date of Invoice : 13-11-2024
Place of Supply : Chhattisgarh (22)
GR/RR No. :
PO NO. : 28347

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

Billed to :

DCDC JEEVAN JYOTI HOSPITAL AMBIKAPUR
DIALYSIS UNIT, JEEVAN JYOTI HOSPITAL
2ND FLOOR, DARRIPARA, AMBIKAPUR
DIST - SURGUJA , CHHATTISGARH - 497001

Party Mobile No : 8210919785
GSTIN / UIN :
D.L. No. :

Shipped to :

DCDC JEEVAN JYOTI HOSPITAL AMBIKAPUR
DIALYSIS UNIT, JEEVAN JYOTI HOSPITAL
2ND FLOOR, DARRIPARA, AMBIKAPUR
DIST - SURGUJA , CHHATTISGARH - 497001

Party Mobile No : 6202873068
GSTIN / UIN :
D.L. No. :

JEEVAN JYOTI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	14	0	1*25	HYPODERMIC 20ML SYRINGE	90183100	53309024	Aug-2029	0.00	250.00	0.00%	12%	3,920.00
2	50	0		Inj Dexa (Mepdex)	30043913	MN24042B	Apr-2026	0.00	7.00	0.00%	12%	392.00
3	30	0		PAPER TAPE 2" 9.1MTR	30059060			0.00	46.60	0.00%	12%	1,565.76
4	400	0		IV SET-ECO	90183990	.aiv54101	Jul-2027	0.00	6.50	0.00%	12%	2,912.00
5	30	0		Gauze Cloth	58031010			850.00	165.00	0.00%	12%	5,544.00
6	1	0		PULSE OXYMETER	90189029			0.00	950.00	0.00%	12%	1,064.00

Stock/No. of Boxes Received 1
Subject to Physical Check
Name/Employee Code Vivek K. Singh.
Centre Name J.S. Hospital Ambikapur
Date/Time 18/11/2024 12:15 P.
Signature [Signature] M. No. 6202873068

Total 15,397.76

Add : Rounded Off (+)

0.24

525.00 0.00

Grand Total ₹ 15,398.00

Tax Rate Taxable Amt. IGST Amt. Total Tax

12% 13,748.000 1,649.760 1,649.760

Rupees Fifteen Thousand Three Hundred Ninety Eight Only

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

Terms & Conditions

E.& O.E.

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

Receiver's Signature :

For Anil Pharma
Authorised Signatory