

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/24-25/1796
 Date of Invoice : 13-11-2024
 Place of Supply : Jharkhand (20)
 GR/RR No. :
 PO NO. : 28342

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

Billed to :

DCDC MGM HOSPITAL JAMSHEDPUR
 MGM HOSPITAL , EAST SINGHMAM BAGH SAKCHI
 DISTRICT JAMSHEDPUR

Shipped to :

DCDC MGM HOSPITAL JAMSHEDPUR
 DIALYSIS UNIT, MGM HOSPITAL
 EAST SINGHBAHM SAKCHI, JAMSHEDPUR
 JHARKHAND - 831001

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

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

JAMSHEDPUR

| S.N. | Qty. | Free | Pack | Products Name | HSN | Batch No. | Exp. | MRP | Rate | Dis. % | GST % | Amount(₹) |
|------|------|------|------|------------------------------|----------|-----------|----------|------|--------|--------|-------|-----------|
| 1 | 500 | 0 | | Fistula Needle 16G | 901839 | .24102301 | Sep-2027 | 0.00 | 11.00 | 0.00% | 12% | 6,160.00 |
| 2 | 500 | 0 | | Fistula Needle 17G | 90183290 | 24100417C | Sep-2027 | 0.00 | 11.00 | 0.00% | 12% | 6,160.00 |
| 3 | 200 | 0 | | IV SET-ECO | 90183990 | AVI54101 | Jul-2027 | 0.00 | 6.50 | 0.00% | 12% | 1,456.00 |
| 4 | 6 | 0 | | Hand Sanitizer(5Ltr) | 38089400 | | | 0.00 | 580.00 | 0.00% | 18% | 4,106.40 |
| 5 | 10 | 0 | | SHARP CONTAINER PLASTIC 3LTR | 90183990 | | | 0.00 | 150.00 | 0.00% | 12% | 1,680.00 |
| 6 | -- | -- | | FREIGHT CHARGES | 996812 | | | 0.00 | -- | 0.00% | 18% | 1,876.20 |

Total 21,438.60

Add : Rounded Off (+)

0.40

1,216.00 0.00

Grand Total ₹ 21,439.00

| Tax Rate | Taxable Amt. | IGST Amt. | Total Tax |
|--------------|-------------------|------------------|------------------|
| 12% | 13,800.000 | 1,656.000 | 1,656.000 |
| 18% | 5,070.000 | 912.600 | 912.600 |
| Total | 18,870.000 | 2,568.600 | 2,568.600 |

Rupees Twenty One Thousand Four Hundred Thirty Nine Only

Stock/No. of Boxes Received 09
 Subject to Physical Check
 Name/Employee Code Anil (DCM/1)
 Centre Name MGM Hospital, Jamshedpur
 Date/Time 13-11-24 (5PM)
 Signature Anil M. No. 209501730

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

