

UIN : 07AAPP6291A1ZR

TAX INVOICE

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/24-25/1829
 Date of Invoice : 14-11-2024
 Place of Supply : Karnataka (29)
 GR/RR No. :
 PO NO. : 28678

Transport : N/A
 Vehicle No. : BHATKAL
 Station :
 E-Way Bill No. : 09-11-2024
 PO DATE :

Billed to :
 DCDC TALUKA HOSPITAL BHATKAL
 DIALYSIS UNIT, TALUKA HOSPITAL BHATKAL ,

Shipped to :
 DCDC TALUKA HOSPITAL BHATKAL
 DIALYSIS UNIT, TALUKA HOSPITAL
 BHATKAL , KARNATAKA - 581320

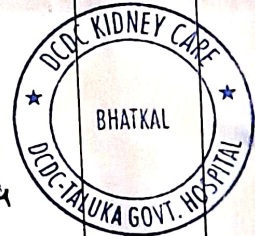
Party Mobile No :
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 8105942976
 GSTIN / UIN :
 D.L. No. :

BHATKAL

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	2	0	1*50	HIV Kit	30029090	OHIV-01201	May-2026	0.00	2,600.00	0.00%	5%	5,460.00
2	2	0	1*50	Hcv Kit	30029090	OHCV-01240	May-2026	0.00	2,650.00	0.00%	5%	5,565.00
3	2	0	1*50	HBSAG Kit	30029090	OHBS-01240	Jul-2026	0.00	550.00	0.00%	5%	1,155.00
4	1	0		BLOOD SPILL KIT	90189029			0.00	1,850.00	0.00%	12%	2,072.00

Stock/No. of Boxes Received 2 BOX
 Subject to Physical Check
 Name/Employee Code
 Centre Name BHATKAL
 Date/Time
 Signature M. No. 9816672744



Total 14,252.00

7.00 0.00

Grand Total ₹ 14,252.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
5%	11,600.000	580.000	580.000
12%	1,850.000	222.000	222.000
Total	13,450.000	802.000	802.000

Rupees Fourteen Thousand Two Hundred Fifty Two 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
 ANIL PHARMA
 Authorised Signatory

