

ATTN : 07AAPP6291A1ZR

TAX INVOICE

Original Copy

Anil Pharma

C- 5B, Rajan Balru Road,, Adarsh Nagar, Delhi-110033
 Tel : 011-41557131 email : anilpharma1997@gmail.com
 Drug Licence No. : 208-137393, 218-137394

Invoice No. : AP/24-25/1789
 Date of Invoice : 13-11-2024
 Place of Supply : Karnataka (29)
 GR/RR No. :
 PO NO. : 28493

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

Billed to :
 DCDC TALUKA HOSPITAL SAVADATTI
 DIALYSIS UNIT , TALUKA HOSPITAL
 SAVADATTI , KARNATAKA - 591126

Shipped to :
 DCDC TALUKA HOSPITAL SAVADATTI
 DIALYSIS UNIT , TALUKA HOSPITAL
 SAVADATTI , KARNATAKA - 591126

Party Mobile No : 8861302728
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 8861302728
 GSTIN / UIN :
 D.L. No. :

SAVADATTI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	5	0		Exam Gloves (M)	40151200			0.00	230.00	0.00%	12%	2,150.00
2	2	0		Exam Gloves (S)	40151200			0.00	230.00	0.00%	12%	510.00
3	20	0		Inj Ranitidine 1*50(R)	30049099	M236	Jun-2026	0.00	3.00	0.00%	12%	61.20
4	50	0		Inj Emset	30049069	MN24168A	Aug-2026	0.00	4.80	0.00%	12%	288.00
5	(to) 5	0		Betadine Powder Nanzine	30049087	N014082A	Jul-2027	45.00	15.00	0.00%	12%	96.00
6	50	0		Inj Avil (Revil)	30049039	M.259	Jun-2026	0.00	3.30	0.00%	12%	166.50
7	-	-		FREIGHT CHARGES	996812			0.00	-	0.00%	18%	1,000.00

Total 3,411.00

132.00 0.00

Grand Total ₹ 3,411.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	2,150.000	258.000	258.000
18%	850.000	153.000	153.000
Total	3,000.000	411.000	411.000

Rupees Three Thousand Four Hundred Eleven Only

Block No. of Invoice : 1/100
 Subject to Physical Check
 Name/Employer Code : Anil Pharma
 Centre Name : Savadatti
 Date/Time : 13/11/24
 Signature : [Signature] M. No. 8861302728

Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000335; IFSC - UJJV0002207

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

 Authorized Signatory