

2 Box ~~2 Box~~

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/24-25/1808
Date of Invoice : 13-11-2024
Place of Supply : Karnataka (29)
GR/RR No. :
PO NO. : 28546

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

Billed to :
DCDC TALUKA HOSPITAL BADAMI
DIALYSIS UNIT, TALUKA GOVERNMENT HOSPITA

Shipped to :
DCDC TALUKA HOSPITAL BADAMI
DIALYSIS UNIT, TALUKA HOSPITAL
BADAMI , KARNATAKA - 587201

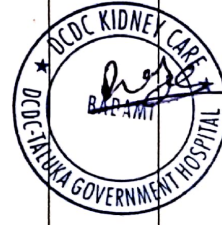
Party Mobile No :
GSTIN / UIN :
D.L. No. :

Party Mobile No : 7338256721
GSTIN / UIN :
D.L. No. :

BADAMI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	300	0		Face Mask Non Wovwn	63079090			0.00	1.50	0.00%	5%	472.50
2	500	0		TRANSDUCER PROTECTOR	90183930			0.00	5.00	0.00%	12%	2,800.00
3	5	0		Exam Gloves (M)	40151200			0.00	230.00	0.00%	12%	1,288.00
4	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,209.50

Stock/No. of Boxes Received 2 - Box
Subject to Physical Check
Name/Employee Code
Centre Name BADAMI
Date/Time 13/11/24 : 1:15 pm
Signature M. No.



Total 5,770.00

805.00 0.00

Grand Total ₹ 5,770.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
5%	450.000	22.500	22.500
12%	3,650.000	438.000	438.000
18%	1,025.000	184.500	184.500
Total	5,125.000	645.000	645.000

Rupees Five Thousand Seven Hundred Seventy 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
Authorised Signatory

