

Invoice No. : AP/24-25/1809
 Date of Invoice : 13-11-2024 ✓
 Place of Supply : Karnataka (29)
 GR/RR No. :
 PO NO. : 28691

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

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

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	1	0		BLOOD SPILL KIT	90189029			0.00	1,850.00	0.00%	12%	2,072.00

Stock/No. of Boxes Received 1 Box
 Subject to Physical Check
 Name/Employee Code DR. N. J. Wadda
 Centre Name BADAMI
 Date/Time 13/11/24 4.35 PM
 Signature [Signature] M. No. 2



Total 2,072.00

1.00 0.00 Grand Total ₹ 2,072.00

Tax Rate Taxable Amt. IGST Amt. Total Tax
 12% 1,850.000 222.000 222.000

Rupees Two Thousand Seventy Two 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

