

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/24-25/1909  
Date of Invoice : 16-11-2024  
Place of Supply : Karnataka (29)  
GR/RR No. :  
PO NO. : 28669

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

**Billed to :**

DCDC DISTRICT HOSPITAL HAVERI  
DIALYSIS UNIT, DISTRICT HOSPITAL  
ROOM NO - 52 , KILLA ROAD , HAVERI  
KARNATAKA - 581110

**Shipped to :**

DCDC DISTRICT HOSPITAL HAVERI  
DIALYSIS UNIT, DISTRICT HOSPITAL  
ROOM NO - 52 , KILLA ROAD , HAVERI  
KARNATAKA - 581110

Party Mobile No : 9844782468  
GSTIN / UIN :  
D.L. No. :

Party Mobile No : 9844782468  
GSTIN / UIN :  
D.L. No. :

HAVERI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	4	0	1*50	HBSAG Kit	30029090	OHBS-01240	Jul-2026	0.00	550.00	0.00%	5%	2,310.00
2	4	0	1*50	HIV Kit	30029090	OHIV-01201	May-2026	0.00	2,600.00	0.00%	5%	10,920.00
3	4	0	1*50	Hcv Kit	30029090	OHCV-01240	May-2026	0.00	2,650.00	0.00%	5%	11,130.00

Total 24,360.00

12.00 0.00

Grand Total ₹ 24,360.00

Tax Rate Taxable Amt. IGST Amt. Total Tax  
5% 23,200.000 1,160.000 1,160.000

Rupees Twenty Four Thousand Three Hundred Sixty Only

Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000335; IFSC UJVN0002207

## Terms &amp; Conditions

E.&amp; 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

Stock/No. of Boxes Received ..... 4  
Subject to Physical Check  
Name/Employee Code ..... Nitobe  
Centre Name Dist Hosp Haveri  
Date/Time ..... 23/11/24

M. No. 9844782468