

GSTIN : 07AAPP661A1ZR

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

GMP

Invoice No. : AP/24-25/1873
 Date of Invoice : 16-11-2024
 Place of Supply : Telangana (36)
 GR/RR No. :
 PO NO. : 28407

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

Billed to :
 DCDC GOVT. HOSPITAL ZAFFERGHAD
 DIALYSIS UNIT, PHC GOVT. HOSPITAL ZAFFER

Shipped to :
 DCDC GOVT. HOSPITAL ZAFFERGHAD
 DIALYSIS UNIT, GOVERNMENT HOSPITAL
 DIST - JANGAON , ZAFFERGHAD
 TELANGANA - 506316

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

Party Mobile No : 7013450233
 GSTIN / UIN :
 D.L. No. :

ZAFFERGHAD

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	300	0		Fistula On Kit	30059040			0.00	7.00	0.00%	12%	2,352.00
2	50	0		Exam Gloves (M)	40151200			0.00	230.00	0.00%	12%	12,880.00
3	300	0		IV SET-ECO	90183990	.aiv54101	Jul-2027	0.00	6.50	0.00%	12%	2,184.00
4	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,516.30

Stock/No. of Boxes Received 2 Box
 Subject to Physical Check
 Name/Employee Code M. Pravalika
 Centre Name Zafferghadh
 Date/Time 16/11/2024
 Signature [Signature]
 M. No. 7013450233

Total 18,932.30
 Less : Rounded Off (-) 0.30

650.00 0.00

Grand Total ₹ 18,932.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	15,550.000	1,866.000	1,866.000
18%	1,285.000	231.300	231.300
Total	16,835.000	2,097.300	2,097.300

Rupees Eighteen Thousand Nine Hundred Thirty 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
 Authorised Signatory