

1 Box

Original Copy

GSTIN : 07AAPP6291A1ZR

TAX INVOICE

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/24-25/1940  
Date of Invoice : 16-11-2024  
Place of Supply : Karnataka (29)  
GR/RR No. :  
PO NO. : 28485  
Transport : N/A  
Vehicle No. :  
Station :  
E-Way Bill No. :  
PO DATE : 07-11-2024

**Billed to :**  
DCDC TALUKA HOSPITAL BASAVAN BAGEVADI  
DIALYSIS UNIT , TALUKA HOSPITAL  
VIAJAYAPURA ROAD , DIST - VIJAYAPURA  
BASAVAN BAGEWADI , KARNATAKA- 586203

**Shipped to :**  
DCDC TALUKA HOSPITAL BASAVAN BAGEVADI  
DIALYSIS UNIT , TALUKA HOSPITAL  
VIAJAYAPURA ROAD , DIST - VIJAYAPURA  
BASAVAN BAGEWADI , KARNATAKA- 586203

Party Mobile No : 6362316903  
GSTIN / UIN :  
D.L. No. :

Party Mobile No : 6362316903  
GSTIN / UIN :  
D.L. No. :

BASAVAN BAGEWADI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	500	0		Fistula Needle 16G	901839	24110601	Oct-2027	0.00	11.00	0.00%	12%	6,160.00
2	500	0		Fistula Needle 17G	90183290	24102501	Nov-2027	0.00	11.00	0.00%	12%	6,160.00
3	200	0		Fistula Off Kit	30059040			0.00	7.00	0.00%	12%	1,568.00
4	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,321.60



Stock/No. of Boxes Received : 01 Box  
Subject to Physical Check  
Name/Employee Code : Shrisantayya / DC03690  
Centre Name : TH. Basavan Bagewadi  
Date/Time : 23/11/24 12PM  
No. : 6362316903

Total 15,209.60  
Add : Rounded Off (+) 0.40

1,200.00 0.00 Grand Total ₹ 15,210.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	12,400.000	1,488.000	1,488.000
18%	1,120.000	201.600	201.600
<b>Total</b>	<b>13,520.000</b>	<b>1,689.600</b>	<b>1,689.600</b>

Rupees Fifteen Thousand Two Hundred Ten 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  
Auth. Sign.  
Authorised Signatory