

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/24-25/541
 Date of Invoice : 12-06-2024
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 26407

Transport : DELHIVERY PRIVATE LIMITED
 Vehicle No. :
 Station : HATHRAS
 E-Way Bill No. : 761435178273
 PO DATE : 04-06-2024

Billed to :

DCDC DISTRICT HOSPITAL HATHRAS
 DCDC DIALYSIS CENTER , DISTRICT HOSPITAL
 ALIGARH ROAD, NEAR RAM MANDIR TALAB
 CHAURAHA , HATHRAS UTTAR PRADESH-204101

Shipped to :

DCDC DISTRICT HOSPITAL HATHRAS
 DIALYSIS UNIT, DISTRICT HOSPITAL
 ALIGARH ROAD , TALAB CHAURAHA
 HATHRAS , UTTAR PRADESH - 204101

Party Mobile No : 7070011575
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 8077095618
 GSTIN / UIN :
 D.L. No. :

HATHRAS

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	2	0	1*50	HBSAG CARD TEST 50TEST FASTVU	30029090	OHBS-01240	Feb-2026	0.00	550.00	0.00%	5%	1,155.00

Stock/No. of Boxes Received 8 Box

Subject to Physical Check

Name/Employee Code J.C.P. 2057

Centre Name D.H. Hathras

Date/Time

Signature M. No. 8077098618

Total 1,155.00

2.00 0.00

Grand Total ₹ 1,155.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
5%	1,100.000	55.000	55.000

Rupees One Thousand One Hundred Fifty Five 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