

GSTIN : 07AAPP6291A1ZR

1 Box

TAX INVOICE

Anil Pharma

Original Copy

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/24-25/623
Date of Invoice : 06-07-2024
Place of Supply : Karnataka (29)
GR/RR No. :
PO NO. : 26716

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 04-07-2024

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

Shipped to :
DCDC TALUKA HOSPITAL BADAMI
DIALYSIS UNIT, TALUKA HOSPITAL
BADAMI , KARNATKA - 587201

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

Party Mobile No : 9164330957
GSTIN / UIN :
D.L. No. :

BADAMI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	100	0		IV SET-ECO	9018	ELPL/03/32	Feb-2027	0.00	6.50	0.00%	12%	728.00
2	200	0		NON WOVEN BED SHEET	6307			0.00	13.00	0.00%	5%	2,730.00
3	4	0	1*50	GB MAXIM 10ML SYRINGE	90183100	A110102480	Jan-2029	0.00	175.00	0.00%	12%	784.00
4	100	0		FITSULA OFF KIT	30059040			0.00	7.00	0.00%	12%	784.00
5	100	0		FITSULA ON-KIT	30059040			0.00	7.00	0.00%	12%	784.00
6	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,292.10

Stock/No. of Boxes Received 1 Box
Subject to Physical Check
Name/Employee Code
Centre Name BADAMI
Date/Time 06/07/2024 10:12 AM
Signature
M. No.

Total 7,102.10
0.10

Less : Rounded Off (-)

504.00 0.00

Grand Total ₹ 7,102.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	2,750.000	330.000	330.000
5%	2,600.000	130.000	130.000
18%	1,095.000	197.100	197.100
Total	6,445.000	657.100	657.100

Rupees Seven Thousand One Hundred 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

