

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/24-25/1618
Date of Invoice : 22-10-2024
Place of Supply : Telangana (36)
GR/RR No. :
PO NO. : 27967

Transport : N/A
Vehicle No. :
Station : KORUTLA
E-Way Bill No. :
PO DATE : 04-10-2024

Billed to :
DCDC CHC HOSPITAL KORUTLA
DIALYSIS UNIT , COMMUNITY HEALTH CENTER
KORUTLA , DISTT. JAGTIAL
TELANGANA-505326

Shipped to :
DCDC CHC HOSPITAL KORUTLA
DIALYSIS UNIT, COMMON HEALTH CENTER
DIST - JAGTIAL , KORUTLA
TELANGANA - 505326

Party Mobile No : 8588850032
GSTIN / UIN :
D.L. No. :

Party Mobile No : 9676017674
GSTIN / UIN :
D.L. No. :

KORUTLA

Table with 12 columns: S.N., Qty, Free, Pack, Products Name, HSN, Batch No., Exp., MRP, Rate, Dis. %, GST %, Amount(₹). Row 1: 30, 0, 1\*50, HMD 10ML SYRING, 90183100, 442102JC2, Sep-2029, 0.00, 247.50, 0.00%, 12%, 8,316.00.

Handwritten notes and stamps: 'Stock/No. of Boxes Received', 'Subject to Physical Check', 'Name/Employee Code', 'Centre Name', 'Date/Time', 'Signature', 'M. No.', 'Remainder 300g', '10/24', 'SPY'.

Total 8,316.00

Grand Total ₹ 8,316.00

Summary table with columns: Tax Rate, Taxable Amt, IGST Amt, Total Tax. Values: 12%, 7,425,000, 891,000, 891,000.

Rupees Eight Thousand Three Hundred Sixteen 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
Authorized Signatory
DELHI