

GSTIN : 07AAPP6291A1ZR

TAX INVOICE

Duplicate Copy

**Anil Pharma**

C-58, Rajan Babu Road, Adarsh Nagar, Delhi-110033

Tel : 011-41557131 email : anilpharma1997@gmail.com

Drug Licence No. : 208-137393, 218-137394

Invoice No. : AP/24-25/1638  
 Date of Invoice : 23-10-2024  
 Place of Supply : Delhi (07)  
 GR/RR No. :  
 PO NO. : 27709

Transport : N/A  
 Vehicle No. : DL01LQ8103  
 Station : EAST OF KAILASH  
 E-Way Bill No. : 791473536193  
 PO DATE : 04-10-2024

**Billed to :**  
 CDC HEALTH SERVICE PVT LTD  
 C-185, FIRST FLOOR, MAYAPURI INDUS.  
 AREA PHASE -2, MAYAPURI  
 NEW DELHI-110054

**Shipped to :**  
 CDC HEALTH SERVICE PVT LTD  
 DIALYSIS UNIT, NATIONAL HEART INST.  
 A 49 50, COMMUNITY CENTER  
 EAST OF KAILASH, NEW DELHI - 110065

Party Mobile No : 9811561247  
 GSTIN / UIN :  
 D.L. No. :

Party Mobile No : 8779590858  
 GSTIN / UIN :  
 D.L. No. :

InC

S.R.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	10	0		HCC DL KIT CURVED	90182030	24092008	Aug-2027	0.00	790.00	0.00%	6%+6%	8,940.00

10 Pkt  
 Subject to Physical Check  
 Invoice/Employee Code  
 Centre Name  
 Date Time 20/10/24 3:10 PM  
 Signature  
 10003155  
 73235142

Total 8,940.00

10.00 0.00

Grand Total ₹ 8,940.00

Tax Rate Taxable Amt. CGST Amt. SGST Amt. Total Tax  
 12% 7,900.00 474.00 474.00 948.00

Rupees Eight Thousand Eight Hundred Forty Eight Only

Bank Details : UJJIVAN SMALL FINANCE BANK, A/c : 2207120040000335; IFSC - UTUV0002207

Terms &amp; Conditions

E &amp; O.E.

- Goods once sold will not be taken back.
- Interest @ 18% p.a. will be charged if the payment is not made within the stipulated time.
- Subject to Delhi Jurisdiction only.

Receiver's Signature :

For Anil Pharma

Authorised Signatory

