

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/24-25/050
 Date of Invoice : 09-04-2024
 Place of Supply : Telangana (36)
 GR/RR No. :
 PO NO. : 25777

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 05-04-2024

Billed to :
 DCDC COMMON HEALTH CENTER ASHWARAOPET
 DIALYSIS CENTER, GOVT. HOSPITAL AHWARAOP

Shipped to :
 DCDC COMMON HEALTH CENTER ASHWARAOPET
 DIALYSIS UNIT, COMMON HEALTH CENTER
 DIST - BHADRADARI KOTHAGUDEM
 ASHWARAOPET, TELANGANA - 507301

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

Party Mobile No : 9121447080
 GSTIN / UIN :
 D.L. No. :

ASHWARAOPET

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(`)
1	100	0		FITSULA OFF KIT	30059040			0.00	7.00	0.00%	12%	784.00
2	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	472.00

Total 1,256.00

100.00 0.00

Grand Total 1,256.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	700.000	84.000	84.000
18%	400.000	72.000	72.000
Total	1,100.000	156.000	156.000

Rupees One Thousand Two Hundred Fifty Six Only

Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000335; IFSC - UJVN0002207

Terms & Conditions

E.& O.E.

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

Receiver's Signature :

For Anil Pharma

Authorised Signatory

Stock/No. of Boxes Received 01
 Subject to Physical Check
 Name/Employee Code Saloni Rani (202824)
 Centre Name Ashwaraopet
 Date/Time 12/04/24
 Signature M. No. 9121447080