

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/24-25/1138
 Date of Invoice : 30-08-2024
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 27268-1

Transport : N/A
 Vehicle No. :
 Station : NOIDA
 E-Way Bill No. :
 PO DATE : 30.08.2024

Billed to :

DCDC YATHARTHA NOIDA
 DIALYSIS UNIT, YATHARTH HOSPITAL
 PLOT NO-01, SECTOR - 110,
 NOIDA , UTTAR PRADESH - 201304

Shipped to :

DCDC YATHARTHA NOIDA
 DIALYSIS UNIT, YATHARTH HOSPITAL
 PLOT NO-01, SECTOR - 110,
 NOIDA , UTTAR PRADESH - 201304

Party Mobile No : 7898867194
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 7898867194
 GSTIN / UIN :
 D.L. No. :

Noida

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount()
1	6	0		N I CUFF	90184100			0.00	500.00	0.00%	12%	3,360.00
2				FREIGHT CHARGES	996812			0.00	--	0.00%	18%	554.60

Stock/No. of Boxes Received 1 PKT
 Subject to Physical Check
 Name/Employee Code DCDC Y
 Centre Name Yatharth Hospital Noida
 Date/Time 30/8/2024 4:30 pm
 Signature M. No. 7898867194

Add : Rounded Off (+)

Total 3,914.60
 0.40

6.00 0.00

Grand Total 3,915.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	3,000.000	360.000	360.000
18%	470.000	84.600	84.600
Total	3,470.000	444.600	444.600

Rupees Three Thousand Nine Hundred Fifteen 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

