

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. : 20B-137393, 21B-137394

Invoice No. : AP/2022-23/1324
 Date of Invoice : 28-03-2023
 Place of Supply : Delhi (07)
 GR/RR No. :
 PO NO. : 22084-2

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 06-03-2023

Billed to :

DCDC HEALTH SERVICE PVT LTD
 C-185 , FIRST FLOOR , MAYAPURI INDUS.
 AREA PHASE -2 , MAYAPURI
 NEW DELHI-110064

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

Shipped to :

DCDC HEALTH SERVICE PVT LTD
 KALRA HOSPITAL
 A-4 5 6 TULSI DASS KALRA MARG
 KIRTI NAGAR , NEW DELHI-110015

Party Mobile No : 8051755839
 GSTIN / UIN :
 D.L. No. :

KALTA NAGAR

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	400	0		FITSULA OFF KIT	30059040			0.00	8.00	0.00%	6%+6%	3,584.00
2	300	0		FITSULA ON-KIT	30059040			0.00	8.00	0.00%	6%+6%	2,688.00

DCDC HSPL CENTRE-KALRA HOSPITAL, MOTI NAGAR
MATERIAL RECEIVED
 DATE 28/03/23
 TIME 3:11 P.M. RECEIVED BY [Signature]

DCDC HSPL CENTRE-KALRA HOSPITAL, KIRTI NAGAR
MATERIAL RECEIVED
 DATE 28/03/23
 TIME 2:11 P.M. RECEIVED BY [Signature]

Total 6,272.00

700.00 0.00

Grand Total ₹ 6,272.00

Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
12%	5,600.000	336.000	336.000	672.000

Rupees Six Thousand Two Hundred Seventy Two 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 :

ANIL PHARMA
 For Anil Sharma
 [Signature]
 Authorised Signatory