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GSTIN : 07AAPP6291A1ZR

TAX INVOICE

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

1628

Invoice No. : AP/24-25/359	Transport : DELHIVERY PRIVATE LIMITED
Date of Invoice : 21-05-2024	Vehicle No. :
Place of Supply : Karnataka (29)	Station : KARWAR
GR/RR No. :	E-Way Bill No. : 701429577181
PO NO. : 26198	PO DATE : 14-05-2024

Billed to : DCDC DISTRICT CIVIL HOSPITAL KARWAR DIALYSIS UNIT, DISTRICT CIVIL HOSPITAL K	Shipped to : DCDC DISTRICT CIVIL HOSPITAL KARWAR DIALYSIS UNIT, DISTRICT HOSPITAL KARWAR , KARNATKA - 581301
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Party Mobile No :	Party Mobile No : 8746959190
GSTIN / UIN :	GSTIN / UIN :
D.L. No. :	D.L. No. :

KARWAR

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount()
1	20	0	1*50	HYPODERMIC STERILE SYRINGE 10M	9018	11803024	Feb-2029	0.00	175.00	0.00%	12%	3,920.00
2	500	0		CATHERIZATION OFF KIT	30059090			0.00	28.00	0.00%	12%	15,680.00
3	500	0		CATHERIZATION ON KIT	30059090			0.00	28.00	0.00%	12%	15,680.00
4	300	0	SURGI	SURGICARE GLOVES 6.50 NO	4015			49.00	16.00	0.00%	12%	5,376.00
5	20	0		DYNAPLAST	3005		---	0.00	149.50	0.00%	12%	3,348.80
6	1,000	0		IV SET-ECO	9018	.HCR23030	Feb-2027	0.00	6.50	0.00%	12%	7,280.00
7	700	0		FITSULA OFF KIT	30059040			0.00	7.00	0.00%	12%	5,488.00
8	700	0		FITSULA ON-KIT	30059040			0.00	7.00	0.00%	12%	5,488.00
9	3	0	1*100	HYPODERMIC STERILE SYRINGE 5ML	9018	13203024	Feb-2029	0.00	195.00	0.00%	12%	655.20
10	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	8,136.10

Total 71,052.10

Less : Rounded Off (-) 0.10

3,743.00 0.00 Grand Total 71,052.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	56,175.000	6,741.000	6,741.000
18%	6,895.000	1,241.100	1,241.100
Total	63,070.000	7,982.100	7,982.100

Rupees Seventy One Thousand Fifty Two Only

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

Terms & Conditions

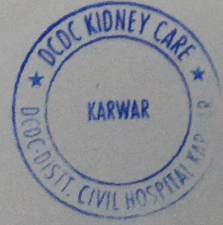
E.& O.E.

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



Stock/No. of Boxes Received ..16 boxes
 Subject to Physical Check
 Name:Employee Code ..DC03418
 Centre Name ..Karwar
 Date/Time ..28-05-24 ..11am
 Signature .. [Signature] ..M. No. 8746959190

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