

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/24-25/1480
 Date of Invoice : 11-10-2024
 Place of Supply : Telangana (36)
 GR/RR No. :
 PO NO. : 27946

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 04-10-2024

Billed to :
 DCDC CHC HOSPITAL DHARMAPURI
 DIALYSIS UNIT COMMON HEALTH CENTER
 DHARMAPURI , DISTT. JAGTIAL
 TELANGANA-505327

Shipped to :
 DCDC CHC HOSPITAL DHARMAPURI
 DIALYSIS UNIT COMMON HEALTH CENTER
 DIST - JAGTIAL , DHARMAPURI
 TELANGANA - 505425

Party Mobile No : 8588819568
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 9121462307
 GSTIN / UIN :
 D.L. No. :

DHARMAPURI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(`)
1	20	0	1*50	HMD 10ML SYRING	90183100	440101JP2	Aug-2029	0.00	247.50	0.00%	12%	5,544.00
2	5	0	1*100	HMD 5ML SYRING	90183100	418053NF2	Apr-2029	6.50	345.00	0.00%	12%	1,932.00

Stock/No. of Boxes Received 02
 Subject to Physical Check
 Name of Receiver Code DC 03201
 Centre Name Dharmapuri
 Date 11/10/24
 Signature [Signature] M. No. 9121462307

Total 7,476.00

Grand Total 7,476.00

25.00 0.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	6,675.000	801.000	801.000

Rupees Seven Thousand Four Hundred Seventy 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