

**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/24-25/1326  
 Date of Invoice : 16-09-2024  
 Place of Supply : Uttar Pradesh (09)  
 GR/RR No. :  
 PO NO. : 27462

Transport : N/A  
 Vehicle No. :  
 Station : RAMPUR  
 E-Way Bill No. :  
 PO DATE : 04-09-2024

**Billed to :**

DCDC SAHARA HOSPITAL RAMPUR  
 DIALYSIS UNIT , SAHARA HOSPITAL  
 JANU NAGAR, SIMARIYA, POST- KEMRI  
 TEHSIL- MILAK , RAMPUR UP-243701

**Shipped to :**

DCDC SAHARA HOSPITAL RAMPUR  
 DIALYSIS UNIT , SAHARA HOSPITAL  
 JANU NAGAR, SIMARIYA, POST- KEMRI  
 TEHSIL- MILAK , RAMPUR UP-243701

Party Mobile No : 8506057008

Party Mobile No : 8506057008

GSTIN / UIN :

GSTIN / UIN :

D.L. No. :

D.L. No. :

Rampur

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount( )
1	2,000	0		GAUZE SWAB	30059090			0.00	6.00	0.00%	12%	13,440.00

Stock/No. of Boxes Received 1 Box  
 Subject to Physical Check  
 Name/Employee Code Michael Jain D. 202411  
 Centre Name Sahara Hospital  
 Date/Time 17/09/2024 2:40 PM  
 Signature [Signature] M. No. 0259538027

Total 13,440.00

2,000.00 0.00

Grand Total 13,440.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	12,000.000	1,440.000	1,440.000

**Rupees Thirteen Thousand Four Hundred Forty Only****Bank Details :** UJJIVAN SMALL FINANCE BANK,, A/c : 2207120040000335; IFSC - UJVN0002207**Terms & Conditions**

E.&amp; 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****Authorised Signatory**