

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/24-25/178  
 Date of Invoice : 22-04-2024  
 Place of Supply : Uttar Pradesh (09)  
 GR/RR No. :  
 PO NO. : 25784

Transport : N/A  
 Vehicle No. :  
 Station :  
 E-Way Bill No. :  
 PO DATE : 12-04-2024

**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  
 GSTIN / UIN :  
 D.L. No. :

Party Mobile No : 8279538027  
 GSTIN / UIN :  
 D.L. No. :

RAMPUR

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	10	0		DIALYZER BOX	3923			0.00	230.00	0.00%	18%	2,714.00
2	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	460.20
<p>Stock/No. of Boxes Received ... 1 Box            Subject to Physical Check            Name/Employee Code ...            Centre Name ...            Date/Time ...            Signature ... M. No. ...</p>												

Total 3,174.20

Less : Rounded Off (-)

0.20

10.00 0.00

Grand Total ₹ 3,174.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
18%	2,690.000	484.200	484.200

Rupees Three Thousand One Hundred Seventy Four Only

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

## Terms &amp; Conditions

E.&amp; 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