

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/2022-23/947
 Date of Invoice : 22-12-2022
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 21083-1

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 09-12-2022

Billed to :

DCDC DISTRICT HOSPITAL FARRUKHABAD
 DR MANOHAR LOHIA MALE DISTRICT
 HOSPITAL FARRUKHABAD
 UTTAR PRADESH-209625

Party Mobile No : 8506004163
 GSTIN / UIN :
 D.L. No. :

Shipped to :

DCDC DISTRICT HOSPITAL FARRUKHABAD
 DR MANOHAR LOHIA MALE DISTRICT
 HOSPITAL FARRUKHABAD
 UTTAR PRADESH-209625

Party Mobile No : 8933040309
 GSTIN / UIN :
 D.L. No. :

FARRUKHABAD

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount()
1	4	0		NEEDLE CUTTER 3LTR	9018			0.00	2,300.00	0.00%	12%	10,304.00

Total 10,304.00

Add : Freight & Forwarding Charges

500.00

4.00 0.00

Grand Total

10,804.00

Tax Rate Taxable Amt. IGST Amt. Total Tax

12% 9,200.000 1,104.000 1,104.000

Rupees Ten Thousand Eight Hundred Four 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**Authorised Signatory**