

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/2022-23/1308
 Date of Invoice : 23-03-2023
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 22047-5

Transport : N/A
 Vehicle No. :
 Station : MAINPURI
 E-Way Bill No. :
 PO DATE : 06-03-2023

Billed to :

DCDC DISTRICT HOSPITAL MAINPURI
 DIALYSIS CENTER, MAHARAJA TEJ PRATAP
 SINGH DISTRICT HOSPITAL, MAINPURI
 UTTAR PRADESH-205001

Shipped to :

DCDC DISTRICT HOSPITAL MAINPURI
 DIALYSIS CENTER, MAHARAJA TEJ PRATAP
 SINGH DISTRICT HOSPITAL, MAINPURI
 UTTAR PRADESH-205001

Party Mobile No : 9713740406
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 9713740406
 GSTIN / UIN :
 D.L. No. :

MAINPURI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	600	0		FACE MASK 3 PLY EARLOOP BLUE	63079090			0.00	1.50	0.00%	5%	945.00

DCDC HOSPITAL CENTRE-DIST. HOSPITAL MAINPURI
MATERIAL RECEIVED
 DATE 13/04/23
 TIME 11:10 AM RECEIVED BY ST-

Total 945.00

Add : Freight & Forwarding Charges

150.00

600.00 0.00

Grand Total ₹ 1,095.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
5%	900.000	45.000	45.000

Rupees One Thousand Ninety Five 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