

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/24-25/016
Date of Invoice : 08-04-2024
Place of Supply : Jharkhand (20)
GR/RR No. :
PO NO. : 25830

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 05-04-2024

Billed to :

DCDC SADAR HOSPITAL SIMDEGA
SADAR HOSPITAL , NH-23 , THANA TOLLI
SALDEGA , SIMDEGA
JHARKHAND-835223

Shipped to :

DCDC SADAR HOSPITAL SIMDEGA
SADAR HOSPITAL , NH-23 , THANA TOLLI
SALDEGA , SIMDEGA
JHARKHAND-835223

Party Mobile No : 8506000395
GSTIN / UIN :
D.L. No. :

Party Mobile No : 8506000395
GSTIN / UIN :
D.L. No. :

SIMDEGA

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	20	0		EXAM GLOVES (M)	4015			0.00	230.00	0.00%	12%	5,152.00
2	20	0		Povinzan M/B Powder	30049087	N0140108	Dec-2026	45.00	15.00	0.00%	12%	336.00
3	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,056.10

Total 6,544.10

Less : Rounded Off (-)

0.10

40.00 0.00

Grand Total ₹ 6,544.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	4,900.000	588.000	588.000
18%	895.000	161.100	161.100
Total	5,795.000	749.100	749.100

Rupees Six Thousand Five Hundred Forty Four 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 :

Stock/No. of Boxes Received 01 Box
Subject to Physical Check
Name/Employee Code Chamasi Kumar, DC01373
Centre Name DH- SIMDEGA
Date/Time 12/04/24, 11:30 AM
Signature Chamasi M. No. 9852393824

For Anil Pharma

Authorized Signatory