

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/24-25/437
 Date of Invoice : 06-06-2024
 Place of Supply : Jharkhand (20)
 GR/RR No. :
 PO NO. : 26420

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 04-06-2024

Billed to :

DCDC CUREASTA GLOBAL HOSPITAL RANCHI
 DIALYSIS UNIT, CUREASTA GLOBAL HOSPITAL

Shipped to :

DCDC CUREASTA GLOBAL HOSPITAL RANCHI
 DIALYSIS UNIT, CURESTA HOSPITAL
 DEEPATOLI , NEAR SURENDRA NATH SCHOOL
 RANCHI , JHARKHAND - 834009

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

Party Mobile No : 9304889041
 GSTIN / UIN :
 D.L. No. :

RANCHI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	10	0		EXAM GLOVES (M)	4015			0.00	230.00	0.00%	12%	2,576.00

Stock/No. of Boxes Received 10 box
 Subject to Physical Check
 Name/Employee Code SATISH MAHATO DC02713
 Centre Name THE CURESTA HOSPITAL RANCHI
 Date/Time 12:40 PM 11/6/2024
 Signature Satish M. No. 6203252540

Total 2,576.00

10.00 0.00

Grand Total ₹ 2,576.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	2,300.000	276.000	276.000

Rupees Two Thousand Five Hundred Seventy Six 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