

GSTIN : 07AAPP6291A1ZR

TAX INVOICE

Original Copy

Anil Pharma

Qr 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/24-25/1228
 Date of Invoice : 11-09-2024
 Place of Supply : Bihar (10)
 GR/RR No. :
 PO NO. : 27434

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 04-09-2024

Billed to :
 DCDC DHARAMSHEELA DEVI HOSPITAL NAWADA
 DIALYSIS UNIT, DHARAMSHEELA DEVI HOSPITA

Shipped to :
 DCDC DHARAMSHEELA DEVI HOSPITAL NAWADA
 DIALYSIS UNIT, DHARAMSHEELA DEVI
 HOSPITAL , KENDUA , NEAR ITI COLLEGE
 NAWADA , BIHAR - 805110

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

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

NAWADA

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(`)
1	100	0		INJ REVIL	30049039	M040	Mar-2026	0.00	3.30	0.00%	12%	369.60
2	5	0		EXAM GLOVES (M)	40151200			0.00	230.00	0.00%	12%	1,288.00
3	20	0		MICROPORE 3"	30059060	2407102	Jun-2027	0.00	75.00	0.00%	12%	1,680.00
4	2	0	1*100	GB MAXIM 5ML SYRINGE	90183100	A1052124F0	May-2029	0.00	195.00	0.00%	12%	436.80
5	1	0	1*50	HYPODERMIC STERILE SYRINGE 10M	90183100	30105024	Apr-2029	0.00	175.00	0.00%	12%	196.00
6	100	0		INJ HYDROCOTISONE 100MG (EFFCO	30043200	24ge01b.	Apr-2026	40.70	23.50	0.00%	5%	2,467.50
7	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	849.60

Add : Rounded Off (+)

Total 7,287.50
0.50

228.00 0.00

Grand Total 7,288.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	3,545.000	425.400	425.400
5%	2,350.000	117.500	117.500
18%	720.000	129.600	129.600
Total	6,615.000	672.500	672.500

Rupees Seven Thousand Two Hundred Eighty Eight 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 ... 1 Box

Subject to Physical Check

Name/Employee Code ... DC03133

Centre Name ... Dharamsheela Devi (Nawada)

Date/Time ... 11/09/24 11:30

Signature ...

For Anil Pharma

Authorized Signatory

7645883232