

GSTIN : 07AAPP6291A1ZR

## TAX INVOICE

Anil Pharma

Original Copy

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/24-25/637  
Date of Invoice : 08-07-2024  
Place of Supply : Karnataka (29)  
GR/RR No. :  
PO NO. : 26603Transport : N/A  
Vehicle No. :  
Station :  
E-Way Bill No. :  
PO DATE : 04.07.2024**Billed to :**  
DCDC TALUKA HOSPITAL SIDDHAPURA  
DIALYSIS UNIT, TALUKA HOSPITAL DIST. UTT**Shipped to :**  
DCDC TALUKA HOSPITAL SIDDHAPURA  
DIALYSIS UNIT, TALUKA HOSPITAL  
DIST - UTTAR KANNADA , SIDDAPURA  
KARNATKA - 581355Party Mobile No :  
GSTIN / UIN :  
D.L. No. :Party Mobile No : 8867417094  
GSTIN / UIN :  
D.L. No. :

SIDDAPURA

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	200	0		FITSULA OFF KIT	30059040			0.00	7.00	0.00%	12%	1,568.00
2	200	0		FITSULA ON-KIT	30059040			0.00	7.00	0.00%	12%	1,568.00
3	1	0		GB MAXIM 10ML SYRINGE	90183100	A1101024B0	Jan-2029	0.00	175.00	0.00%	12%	196.00
4	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	731.60

Add : Rounded Off (+)

Total 4,063.60  
0.40

401.00 0.00

Grand Total ₹ 4,064.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	2,975.000	357.000	357.000
18%	620.000	111.600	111.600
<b>Total</b>	<b>3,595.000</b>	<b>468.600</b>	<b>468.600</b>

Rupees Four Thousand Sixty Four Only

Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000335; IFSC - UJVN0002207

## Terms &amp; Conditions

E.&amp; 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