

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/24-25/1001
 Date of Invoice : 12-08-2024
 place of Supply : Haryana (06)
 GR/RR No. :
 PO NO. : 27043

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 05-08-2024

Billed to :

DCDC CIVIL HOSPITAL FATEHABAD
 DIALYSIS UNIT , GROUND FLOOR ,
 NEAR BUS STAND , MODEL TOWN
 FATEHABAD HARYANA-125050

Party Mobile No : 8506005588
 GSTIN / UIN :
 D.L. No. :

Shipped to :

DCDC CIVIL HOSPITAL FATEHABAD
 DIALYSIS UNIT , GROUND FLOOR ,
 NEAR BUS STAND , MODEL TOWN
 FATEHABAD HARYANA-125050

Party Mobile No : 7027052450
 GSTIN / UIN :
 D.L. No. :

FATEHABAD

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	2	0		DIAL,CHECK-ANEROID SPHYG (BP)	90189011			0.00	850.00	0.00%	12%	1,904.00

Stock/No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature
 NO.

Stock/No. of Boxes Received 4
 Subject to Physical Check ✓
 Name/Employee Code Disha 3396
 Centre Name Ch-Fatehabad
 Date/Time 16-8-24
 Signature [Signature]
1:30PM
89290-67

Total 1,904.00

2.00 0.00

Grand Total ₹ 1,904.00

Tax Rate Taxable Amt. IGST Amt. Total Tax
 12% 1,700.000 204.000 204.000

Rupees One Thousand Nine Hundred 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 :

For Anil Pharma**Authorised Signatory**