

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/24-25/1281
 Date of Invoice : 13-09-2024
 Place of Supply : Haryana (06)
 GR/RR No. :
 PO NO. : 27499

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

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

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

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

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	10	0		INJ ZINOCINE (LOX 2%)	30049088	NZLI-006	Oct-2025	0.00	29.00	0.00%	12%	324.80

Stock/No. of Boxes Received 1
 Subject to Physical Check ✓
 Name/Employee Code Diha 3396
 Centre Name Ch - Fatehabad
 Date/Time 21-09-24 12:30 PM
 Signature M. No. 89298-67527

Total 324.80

Add : Rounded Off (+)

0.20

10.00 0.00

Grand Total ₹ 325.00

Tax Rate Taxable Amt. IGST Amt. Total Tax
 12% 290.000 34.800 34.800

Rupees Three Hundred Twenty Five 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