

GSTIN : 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/24-25/1680
Date of Invoice : 23-10-2024
Place of Supply : Haryana (06)
GR/RR No. :
PO NO. : 27784

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 04-10-2024

Billed to :

DCDC CIVIL HOSPITAL BAHADURGARH
CIVIL HOSPITAL , DIALYSIS UNIT
NADHYA MARG , OLD INDUSTRIAL AREA
BAHADURGARH
HARYANA-124507

Party Mobile No : 8506006622
GSTIN / UIN :
D.L. No. :

Shipped to :

DCDC CIVIL HOSPITAL BAHADURGARH
DIALYSIS UNIT, CIVIL HOSPITAL
MADHYA MARG, OLD INDUSTRIAL AREA
BAHADURGARH , HARYANA - 124507

Party Mobile No : 8506006622
GSTIN / UIN :
D.L. No. :

BAHADURGARH

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	1,000	0		FITSULA OFF KIT	30059040			0.00	7.00	0.00%	12%	7,840.00
2	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	649.00



Box-1
DCDC 504
Name Employee Code
Centre Name CH. B. garh
Date/Time 21.11.24 12:10PM
Signature Madhy M. No. 8506006622

Total 8,489.00
Add : Rounded Off (+) 0.00

1,000.00 0.00

Grand Total ₹ 8,489.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	7,000.000	840.000	840.000
18%	550.000	99.000	99.000
Total	7,550.000	939.000	939.000

Rupees Eight Thousand Four Hundred Eighty Nine 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

