

N : 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/24-25/620  
 Date of Invoice : 06-07-2024  
 Place of Supply : Karnataka (29)  
 GR/RR No. :  
 PO NO. : 26722

Transport : N/A  
 Vehicle No. :  
 Station :  
 E-Way Bill No. :  
 PO DATE : 04-07-2024

**Billed to :**  
 DCDC TALUKA HOSPITAL BILAGI  
 DIALYSIS UNIT, TALUKA GOVERNMENT HOSPITA

**Shipped to :**  
 DCDC TALUKA HOSPITAL BILAGI  
 DIALYSIS UNIT, TALUKA HOSPITAL  
 BILAGI , KARNTAKA - 587116

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

Party Mobile No : 7892574434  
 GSTIN / UIN :  
 D.L. No. :

BILAGI

| S.N. | Qty. | Free | Pack | Products Name | HSN  | Batch No.  | Exp.     | MRP  | Rate | Dis. % | GST % | Amount(₹) |
|------|------|------|------|---------------|------|------------|----------|------|------|--------|-------|-----------|
| 1    | 200  | 0    |      | IV SET-ECO    | 9018 | ELPL/03/32 | Feb-2027 | 0.00 | 6.50 | 0.00%  | 12%   | 1,456.00  |

Total 1,456.00

200.00 0.00

Grand Total ₹ 1,456.00

Tax Rate Taxable Amt. IGST Amt. Total Tax  
 12% 1,300.000 156.000 156.000

Rupees One Thousand Four Hundred Fifty Six Only

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

Terms &amp; Conditions

E.&amp;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

Stock/No. of Boxes Received 01 Box  
 Subject to Physical Check  
 Name/Employee Code DC03599  
 Centre Name Bilagi  
 Date/Time 06.07.24  
 Signature