

* UIN : 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/24-25/1041
Date of Invoice : 16-08-2024
Place of Supply : Uttar Pradesh (09)
GR/RR No. :
PO NO. : 27002

Transport : DELHIVERY PRIVATE LIMITED
Vehicle No. :
Station : HATHRAS
E-Way Bill No. : 721451101714
PO DATE : 05-08-2024

Billed to :
DCDC DISTRICT HOSPITAL HATHRAS
DCDC DIALYSIS CENTER , DISTRICT HOSPITAL
ALIGARH ROAD, NEAR RAM MANDIR TALAB
CHAURAHA , HATHRAS UTTAR PRADESH-204101

Shipped to :
DCDC DISTRICT HOSPITAL HATHRAS
DIALYSIS UNIT, DISTRICT HOSPITAL
ALIGARH ROAD, TALAB CHAURAHA
HATHRAS , UTTAR PRADESH - 204101

Party Mobile No : 7070011575
GSTIN / UIN :
D.L. No. :

Party Mobile No : 8077095618
GSTIN / UIN :
D.L. No. :

HATHRAS

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	50	0		DIALYZER BOX	39231020			0.00	230.00	0.00%	18%	13,570.00

Stock/No. of Boxes Received 2 Boxes
Subject to Physical Check
Name/Employee Code S. K. Singh
Centre Name D.H. Hathras
Date/Time 16/08/2024
Signature [Signature] No. 8077095618

Total 13,570.00

50.00 0.00

Grand Total ₹ 13,570.00

Tax Rate Taxable Amt. IGST Amt. Total Tax
18% 11,500.000 2,070.000 2,070.000

Rupees Thirteen Thousand Five Hundred Seventy 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