

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/24-25/627
Date of Invoice : 08-07-2024
Place of Supply : Karnataka (29)
GR/RR No. :
PO NO. : 26671

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 04.07.2024

Billed to :
DCDC TALUKA HOSPITAL DANDELI
DIALYSIS UNIT, TALUKA HOSPITAL DIST. UTT

Shipped to :
DCDC TALUKA HOSPITAL DANDELI
DIALYSIS UNIT, TALUKA HOSPITAL
DIST - UTTAR KANNADA , DANDELI
KARNATKA - 581325

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

Party Mobile No : 8867417094
GSTIN / UIN :
D.L. No. :

DANDELI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount (`)
1	12	0	1X6	MICROPORE 2"	30059060	2404002	Mar-2027	0.00	46.60	0.00%	12%	626.30
2	--	--	--	FREIGHT CHARGES	996812			0.00	--	0.00%	18%	259.60

Total 885.90

Add : Rounded Off (+)

0.10

12.00 0.00

Grand Total

886.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	559.200	67.104	67.104
18%	220.000	39.600	39.600
Total	779.200	106.704	106.704

Rupees Eight Hundred Eighty Six 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