

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/2022-23/1157  
Date of Invoice : 20-02-2023  
Place of Supply : Telangana (36)  
GR/RR No. :  
PO NO. :

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

Billed to :  
DCDC CHC HOSPITAL DHARMAPURI  
DIALYSIS UNIT COMMON HEALTH CENTER  
DHARMAPURI , DISTT. JAGTIAL  
TELANGANA-505327

Shipped to :  
DCDC CHC HOSPITAL DHARMAPURI  
DIALYSIS UNIT COMMON HEALTH CENTER  
DHARMAPURI , DISTT. JAGTIAL  
TELANGANA-505327

Party Mobile No : 8588819568  
GSTIN / UIN :  
D.L. No. :

Party Mobile No : 8588819568  
GSTIN / UIN :  
D.L. No. :

DHARMAPURI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount ( ` )
1	900	0		FITSULA OFF KIT	30059040			0.00	8.00	0.00%	12%	8,064.00

Total 8,064.00

900.00 0.00

Grand Total 8,064.00

Tax Rate Taxable Amt. IGST Amt. Total Tax

12% 7,200.000 864.000 864.000

Rupees Eight Thousand Sixty Four Only

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

Terms &amp; Conditions

E. &amp; 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