

IN : 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/24-25/406
 Date of Invoice : 06-06-2024
 Place of Supply : Karnataka (29)
 GR/RR No. :
 PO NO. : 26249

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 04-06-2024

Billed to :
 DCDC TALUKA GENERAL HOSPITAL ATHANI
 DIALYSIS UNIT, TALUKA GENERAL HOSPITAL N

Shipped to :
 DCDC TALUKA GENERAL HOSPITAL ATHANI
 DIALYSIS UNIT, TALUKA HOSPITAL
 NEAR KARNATKA BANK MIRAJ ROAD
 BASVARESHWAR CIRCLE, ATHANI
 KARNATKA - 591304
 Party Mobile No : 9620715281
 GSTIN / UIN :
 D.L. No. :

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

ATHANI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	50	0		BT SET (NV)	90183990	HCRBT001	Nov-2025	0.00	19.00	0.00%	12%	1,064.00

Total 1,064.00

50.00 0.00

Grand Total ₹ 1,064.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	950.000	114.000	114.000

Rupees One Thousand Sixty Four Only

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

Terms & Conditions

E.& 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

Stock/No. of Boxes Received 02

Subject to Physical Check

Name/Employee Code .. Anand

Centre Name .. Athani

Date/Time .. 06/06/2024 1:30 PM

Signature .. [Signature] M No. 9620715281