

GSTIN : 07AAPP6291A1ZR

TAX INVOICE

Duplicate 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/24-25/579
Date of Invoice : 19-06-2024
Place of Supply : Delhi (07)
GR/RR No. :
PO NO. : 26317-1

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

Billed to :

DCDC HEALTH SERVICE PVT LTD
C-185 , FIRST FLOOR , MAYAPURI INDUS.
AREA PHASE -2 , MAYAPURI
NEW DELHI-110064

Shipped to :

DCDC HEALTH SERVICE PVT LTD
DIALYSIS UNIT, H-1 KAILASH PARK
NEAR MOTI NAGAR METRO PILLAR NO - 330
MOTI NAGAR , NEW DELHI - 110015

Party Mobile No : 9811561247
GSTIN / UIN :
D.L. No. :

Party Mobile No : 88040000500
GSTIN / UIN :
D.L. No. :

MOTI NAGAR

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	300	0		SURGICARE GLOVES 6.NO	4015			49.00	18.00	0.00%	6%+6%	6,048.00

Stock/No. of Boxes Received 6 Plets
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature
 6 Plets
 19/6/24
 073235142

300.00 0.00

Grand Total ₹ 6,048.00

Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
12%	5,400.000	324.000	324.000	648.000

Rupees Six Thousand Forty Eight 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
 Anil Pharma
 Auth. Signatory
 Delhi