

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/24-25/1545
Date of Invoice : 16-10-2024
Place of Supply : Telangana (36)
GR/RR No. :
PO NO. : 27690

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 04-10-2024

Billed to :
DCDC GOVT. HOSPITAL ZAFFERGHAD
DIALYSIS UNIT, PHC GOVT. HOSPITAL ZAFFER

Shipped to :
DCDC GOVT. HOSPITAL ZAFFERGHAD
DIALYSIS UNIT, GOVERNMENT HOSPITAL
DIST - JANGAON , ZAFFERGHAD
TELANGANA - 506316

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

Party Mobile No : 7013450233
GSTIN / UIN :
D.L. No. :

ZAFFERGHAD

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	500	0		FACE MASK 3 PLY EARLOOP BLUE	63079090			0.00	1.50	0.00%	5%	787.50
2	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	295.00

Stock/No. of Boxes Received ①
Subject to Physical Check
Name/Employee Code M. Paavalka.
Centre Name Zafferghad
Date/Time 16/10/2024
Signature [Signature] M. No. 7013450233

Total 1,082.50
Add : Rounded Off (+) 0.50

500.00 0.00

Grand Total ₹ 1,083.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
5%	750.000	37.500	37.500
18%	250.000	45.000	45.000
Total	1,000.000	82.500	82.500

Rupees One Thousand Eighty Three 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
[Signature]
Authorized Signatory
DELHI