

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/24-25/1063
Date of Invoice : 21-08-2024
Place of Supply : Telangana (36)
GR/RR No. :
PO NO. : 27199

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 21-08-2024

Billed to :
DCDC GOVT. HOSPITAL NARSAMPET
COMMON HEALTH CENTER, GOVT. HOSPITAL NEA

Shipped to :
DCDC GOVT. HOSPITAL NARSAMPET
DIALYSIS UNIT, COMMON HEALTH CENTER
NEAR POLICE STATION , DIST - WARANGAL
NARSAMPET, TELANGANA - 506132

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

Party Mobile No : 9502696731
GSTIN / UIN :
D.L. No. :

NARSAMPET

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	50	0		EXAM GLOVES (M)	40151200			0.00	230.00	0.00%	12%	12,880.00
2	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,640.20

Total **14,520.20**
Less : Rounded Off (-) 0.20

50.00 0.00

Grand Total ₹ 14,520.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	11,500.000	1,380.000	1,380.000
18%	1,390.000	250.200	250.200
Total	12,890.000	1,630.200	1,630.200

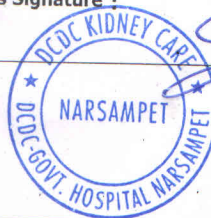
Rupees Fourteen Thousand Five Hundred Twenty Only

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

Authorized Signatory