

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/24-25/1684
Date of Invoice : 23-10-2024
Place of Supply : Haryana (06)
GR/RR No. :
PO NO. : 27797

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

Billed to :
DCDC CIVIL HOSPITAL SONEPAT
CIVIL HOSPITAL SONEPAT

Shipped to :
DCDC CIVIL HOSPITAL SONEPAT
DIALYSIS UNIT, CIVIL HOSPITAL
SONIPAT, HARYANA - 131001

Party Mobile No : 8506004422
GSTIN / UIN :
D.L. No. :

Party Mobile No : 9729646548
GSTIN / UIN :
D.L. No. :

SONIPAT

Table with 12 columns: S.N., Qty., Free, Pack, Products Name, HSN, Batch No., Exp., MRP, Rate, Dis. %, GST %, Amount(₹). Rows include FITSULA OFF KIT and FREIGHT CHARGES.

Handwritten notes: of Boxes Received, Stock/No. of Boxes Received, Subject to Physical Check, Name/Employee Code, Centre Name, Date/Time, Signature, M. No.

1,900.00 0.00 Total 15,899.00
Grand Total ₹ 15,899.00

Table with 4 columns: Tax Rate, Taxable Amt., IGST Amt., Total Tax. Rows for 12% and 18% rates.

Rupees Fifteen Thousand Eight Hundred Ninety Nine 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

