GSTIN: 07AAPPG6291A1ZR TAX INVOICE Original Copy 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/24-25/1354 Transport : N/A Vehicle No. Date of Invoice : 19-09-2024 Place of Supply : Uttar Pradesh (09) Station GR/RR No. E-Way Bill No. PO NO. PO DATE : 27330 : 04-09-2024 Shipped to: Billed to: DCDC DISTRICT HOSPITAL MAU DCDC DISTRICT HOSPITAL MAU DIALYSIS UNIT, DISTRICT HOSPITAL DISTRICT HOSPITAL, NEAR GHAZIPUR TIRAHA MAU, UTTAR PRADESH- 275101 NEAR GHAZIPUR TIRAHA, MAU UTTAR PRADESH - 275101 Party Mobile No: 9716387059 Party Mobile No: 8506004163 GSTIN / UIN GSTIN / UIN D.L. No. D.L. No. MAU Free Pack Products Name S.N. HSN Batch No Qty. Dis. % GST % Ехр. **MRP** Rate Amount(`) 120 0 PAPER TAPE 2" 9.1MTR 30059060 0.00 46.60 0.00% 12% 6,263.04

Less: Rounded Off (-)

6,263.04

6,263.00

0.04

120.00 0.00 Grand Total

<u>Tax Rate</u> <u>Taxable Amt. IGST Amt.</u> <u>Total Tax</u> 12% 5,592.000 671.040 671.040

Terms & Conditions

Rupees Six Thousand Two Hundred Sixty Three Only

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

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** 

Total