

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/24-25/1183
 Date of Invoice : 09-09-2024
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 27495

Transport : BY HAND
 Vehicle No. : DL01LQ8103
 Station : GHAZIABAD
 E-Way Bill No. : 741457212397
 PO DATE : 04-09-2024

Billed to :

DCDC CIVIL HOSPITAL GHAZIABAD
 DIALYSIS UNIT, DISTRICT HOSPITAL
 SECTOR - 23 , GHAZIABAD
 UTTAR PRADESH - 201001

Shipped to :

DCDC CIVIL HOSPITAL GHAZIABAD
 DIALYSIS UNIT, DISTRICT HOSPITAL
 SECTOR - 23 , GHAZIABAD
 UTTAR PRADESH - 201001

Party Mobile No : 8506002727
 GSTIN / UIN :
 D.L. No. :

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 GSTIN / UIN :
 D.L. No. :

GHAZIABAD

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	100	0		MICROPORE 3"	30059060	2407102	Jun-2027	0.00	75.00	0.00%	12%	8,400.00
											Total	8,400.00

Stock/No. of Boxes Received 107
 Subject to Physical Check
 Name/Employee Code 1278 Keshava
 Centre Name CIB
 Date/Time 10/9/2024 9:00
 Signature M. No. 912022860

Grand Total ₹ 8,400.00

100.00 0.00

Tax Rate Taxable Amt. IGST Amt. Total Tax
 12% 7,500.000 900.000 900.000

Rupees Eight Thousand Four Hundred 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
 Auth. Signatory
 Anil Pharma
 DELHI