

GSTIN : 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/2022-23/1334
 Date of Invoice : 29-03-2023
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 22135-1

Transport : N/A
 Vehicle No. :
 Station :
 E-Way Bill No. :
 PO DATE : 29-03-2023

Billed to :

DCDC COMBINED HOSPITAL AMBEDKAR NAGAR
 COMBINED HOSPITAL
 AKBARPUR , AMBEDKAR NAGAR
 UTTAR PRADESH-224122

Party Mobile No : 8506049007
 GSTIN / UIN :
 D.L. No. :

Shipped to :

DCDC COMBINED HOSPITAL AMBEDKAR NAGAR
 COMBINED HOSPITAL
 AKBARPUR , AMBEDKAR NAGAR
 UTTAR PRADESH-224122

Party Mobile No : 7268821754
 GSTIN / UIN :
 D.L. No. :

AMBEDKAR NAGAR

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	2	0		DIAL CHECK-ANEROID SPHYG (BP)	9018		---	0.00	950.00	0.00%	12%	2,128.00

DCDC HOSPITAL CENTRE-DISTRICT HOSPITAL AMBEDKAR NAGAR

MATERIAL RECEIVED

DATE.....

TIME.....RECEIVED BY.....*Rohit Singh*

Total 2,128.00

2.00 0.00

Grand Total ₹ 2,128.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	1,900.000	228.000	228.000

Rupees Two Thousand One Hundred Twenty Eight 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

Tax Invoice

(ORIGINAL FOR RECIPIENT)

ANCHOR FAB (2022-23)
 B - 4/2, Okhla Industrial Area, Phase-II, New Delhi-11
 GST NO. 07ABAPS2131D1Z7
 Delhi - 110020, India
 GSTIN/UIN: 07ABAPS2131D1Z7
 State Name : Delhi, Code : 07
 E-Mail : pulkit77@hotmail.com
 Consignee (Ship to)

Invoice No.

Dated

789

20-Mar-23

Delivery Note

Mode/Terms of Payment

Reference No. & Date.

Other References

Buyer's Order No

Dated

72-032023-22037-2

6-Mar-23

Dispatch Doc.No.

Delivery Note Date

Dispatched through

Destination

Bill of Lading/LR-RR No.

UTTAR PRADESH

Motor Vehicle No.

DL03CCH0214

Terms of Delivery

Rahul
 7268821754

DCDC Health Services Pvt Ltd.
 AMBEDKAR NAGAR COMBINED HOSPITAL
 AKBARPUR, UTTAR PRADESH - 224122
 Uttar Pradesh - 110064, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Uttar Pradesh, Code : 09
 Buyer (Bill to)

DCDC Health Services Pvt Ltd.
 C-185, 1st Floor, Mayapuri Industrial
 Area, Phase -2, New Delhi.
 Delhi - 110064, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	SKY BLUE SCRUB SUIT LARGE BLUE UNIFORM LARGE	6302	5 %	2 Set	400.00	Set		800.00
2	SKY BLUE SCRUB SUIT MEDIUM BLUE UNIFORM MEDIUM	6302	5 %	5 Set	400.00	Set		2,000.00
								2,800.00
								SGST 2.5% 70.00
								CGST 2.5% 70.00

DCDC HOSPITAL CENTRE-DISTRICT HOSPITAL AMBEDKAR
MATERIAL RECEIVED

DATE.....
 TIME..... RECEIVED BY: *Rahul Singh*

Total

7 Set

₹ 2,940.00

E & O E

Amount Chargeable (in words)

INR Two Thousand Nine Hundred Forty Only

HSN/SAC	Taxable Value		Central Tax		State Tax		Total
	Value	Rate	Amount	Rate	Amount	Tax Amount	
6302	2,800.00	2.50%	70.00	2.50%	70.00	140.00	
Total	2,800.00		70.00		70.00	140.00	

Tax Amount (in words) : **INR One Hundred Forty Only**

Company's Bank Details

A/c Holder's Name : **ANCHOR FAB**

Bank Name : **HDFC BANK LTD**

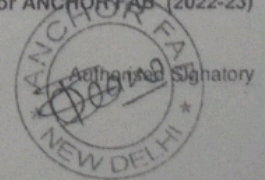
A/c No. : **03372020000609**

Branch & IFS Code : **MAA ANANDMAYI MARG OKHALA INDL PH-2 & HDFC0000337**

for **ANCHOR FAB (2022-23)**

Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.



This is a Computer Generated Invoice