

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/2022-23/1236  
Date of Invoice : 11-03-2023  
Place of Supply : Uttar Pradesh (09)  
GR/RR No. :  
PO NO. : 22037-1

Transport : N/A  
Vehicle No. :  
Station :  
E-Way Bill No. :  
PO DATE : 06-03-2023

**Billed to :**  
DCDC COMBINED HOSPITAL AMBEDKAR NAGAR  
COMBINED HOSPITAL  
AKBARPUR, AMBEDKAR NAGAR  
UTTAR PRADESH-224122

**Shipped to :**  
DCDC COMBINED HOSPITAL AMBEDKAR NAGAR  
COMBINED HOSPITAL  
AKBARPUR, AMBEDKAR NAGAR  
UTTAR PRADESH-224122

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

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	20	0		Povinz M/B Powder	30049087	PNP-009	Dec-2025	45.00	15.00	0.00%	12%	336.00
2	80	0		EXAM GLOVES LATEX	4015			590.00	230.00	0.00%	12%	20,608.00
3	10	0		G PLAST	3005	2302DFO	Jan-2028	0.00	75.00	0.00%	12%	840.00
4	1,500	0		IV SET-ECO	9018			0.00	6.50	0.00%	12%	10,920.00
5	20	0	1*50	HYPODERMIC STERILE SYRINGE 10M	9018	49812022	Nov-2027	0.00	175.00	0.00%	12%	3,920.00
6	3	0	1*100	HYPODERMIC STERILE SYRINGE 5ML	9018	6802023	Jan-2027	0.00	195.00	0.00%	12%	655.20
7	100	0		MICROPOR 3"	3005	221222.7	Nov-2025	984.00	75.00	0.00%	12%	8,400.00

DCDCCHSPL CENTRE-DISTRICT HOSPITAL, AMBEDKAR NAGAR  
**MATERIAL RECEIVED**

DATE: 18/03/2023

TIME: RECEIVED BY: R. S. S.

Less : Rounded Off (-)

Total 45,679.20

Add : Freight &amp; Forwarding Charges

0.20

2,760.00

1,733.00 0.00

Grand Total ₹ 48,439.00

Tax Rate Taxable Amt. IGST Amt. Total Tax  
12% 40,785.000 4,894.200 4,894.200

Rupees Forty Eight Thousand Four Hundred Thirty Nine Only

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

## Terms &amp; Conditions

E.&amp; O.E.

- Goods once sold will not be taken back.
- Interest @ 18% p.a. will be charged if the payment is not made within the stipulated time.
- Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :

For Anil Pharma  
Authorised Signatory