

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/24-25/1362  
 Date of Invoice : 19-09-2024  
 Place of Supply : Karnataka (29)  
 GR/RR No. :  
 PO NO. : 27652-1

Transport : N/A  
 Vehicle No. :  
 Station :  
 E-Way Bill No. :  
 PO DATE : 19.09.2024

**Billed to :**  
 DCDC TALUKA HOSPITAL SHIRAHATTI  
 DIALYSIS UNIT, TALUKA HOSPITAL DIST. GAD

**Shipped to :**  
 DCDC TALUKA HOSPITAL SHIRAHATTI  
 DIALYSIS UNIT, TALUKA HOSPITAL  
 DIST - GADAG , SHIRAHATTI  
 KARNATKA - 582120

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

Party Mobile No : 9886516063  
 GSTIN / UIN :  
 D.L. No. :

SHIRAHATTI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount( )
1	50	0		INJ NORAD 2ML	30042019	NB-01.	Mar-2025	0.00	27.90	0.00%	12%	1,562.40



Stock/No. of Boxes Received  
 Subject to Physical Check  
 Name/Employer : BASAVARAJ  
 Centre Name : SHIRAHATTI  
 Date/Time : 16/9/24  
 Signature : [Signature]  
 M. No. : 9886516063

Total 1,562.40

Less : Rounded Off (-)

0.40

50.00 0.00

Grand Total

1,562.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	1,395.000	167.400	167.400

Rupees One Thousand Five Hundred Sixty Two 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 with in the stipulated time.
- Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :

For Anil Pharma

Authorised Signatory