

GSTIN : 07AAPPG6291A1ZR

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. : 208-137393, 21B-137394

Invoice No. : AP/24-25/1304
 Date of Invoice : 14-09-2024
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 27433

Transport : N/A
 Vehicle No. :
 Station : CHANDAULI
 E-Way Bill No. :
 PO DATE : 04-09-2024

Billed to :

DCDC DISTRICT HOSPITAL CHANDAULI
 DIALYSIS UNIT, PT. KAMLA PATI TRIPATHI
 DIATRICT HOSPITAL, CHANDAULI
 UTTAR PRADESH-232104

Party Mobile No : 9935020597
 GSTIN / UIN :
 D.L. No. :

Shipped to :

DCDC DISTRICT HOSPITAL CHANDAULI
 DIALYSIS UNIT, PT KAMLAPATI TRIPATH
 DISTRICT HOSPITAL , CHANDAULI
 UTTAR PRADESH - 232104

Party Mobile No : 8115409765
 GSTIN / UIN :
 D.L. No. :

CHANDAULI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(')
1	2	0		ISOPROPYL ALCOHOL (SPIRIT)	30049099			0.00	595.00	0.00%	12%	1,332.80

Total 1,332.80

Add : Rounded Off (+)

0.20

2.00 0.00

Grand Total

1,333.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	1,190.000	142.800	142.800

Rupees One Thousand Three Hundred Thirty Three 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

Stock/No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature M. No.

