

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/2022-23/1087
 Date of Invoice : 01-02-2023
 Place of Supply : Haryana (06)
 GR/RR No. :
 PO NO. :

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

Billed to :
 DCDC CIVIL HOSPITAL SONEPAT
 CIVIL HOSPITAL SONEPAT

Shipped to :
 DCDC CIVIL HOSPITAL SONEPAT
 CIVIL HOSPITAL SONEPAT

Party Mobile No : 8506004422
 GSTIN / UIN :
 D.L. No. :

Party Mobile No : 8506004422
 GSTIN / UIN :
 D.L. No. :

SONIPAT

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount ()
1	1	0		INJ Frusamide 1*50 (R) / LASI	3004	.FM-121	Jul-2024	0.00	142.50	0.00%	12%	159.60

MATERIAL RECEIVED
 DCDC HSPL CENTRE-CIVIL HOSPITAL
 SONIPAT

DATE 28/1/2023
 TIME 3:00

RECEIVED BY Khushboo
 DCDC KIDNEY CARE
 CIVIL HOSPITAL
 SONEPAT

Khushboo
 28/1/23

Total 159.60
 Add : Rounded Off (+) 0.40

1.00 0.00

Grand Total 160.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	142.500	17.100	17.100

Rupees One Hundred Sixty 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