

1 Box

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/24-25/622
Date of Invoice : 06-07-2024
Place of Supply : Karnataka (29)
GR/RR No. :
PO NO. : 26618

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 04-07-2024

Billed to :
DCDC TALUKA HOSPITAL YELLAPURA
DIALYSIS UNIT, TALUKA HOSPITAL DIST. UTT

Shipped to :
DCDC TALUKA HOSPITAL YELLAPURA
DIALYSIS UNIT , TALUKA HOSPITAL
DIST - UTTAR KANNADA , YELLAPURA
KARNATKA - 581359

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

Party Mobile No : 9686989388
GSTIN / UIN :
D.L. No. :

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	100	0		SURGICARE GLOVES 6.NO	4015			49.00	18.00	0.00%	12%	2,016.00
2	2	0	1*50	GB MAXIM 10ML SYRINGE	90183100	A1101024B0	Jan-2029	0.00	175.00	0.00%	12%	392.00
3	12	0		PAPER TAPE 2" 9.1MTR	30059060	MST 240401	Mar-2027	0.00	46.60	0.00%	12%	626.30
4	100	0		NON WOVEN BED SHEET	6307			0.00	13.00	0.00%	5%	1,365.00
5	5	0		EXAM GLOVES (M)	4015			0.00	230.00	0.00%	12%	1,288.00
6	15	0		INJ CARNIXOL	3004	Mn24024b	Apr-2026	0.00	19.65	0.00%	12%	330.12
7	2	0		COTTON ROLL	30059010	600	Apr-2027	0.00	115.00	0.00%	12%	257.60
8	100	0		IV SET-ECO	9018	ELPL/03/32	Feb-2027	0.00	6.50	0.00%	12%	728.00
9	--	--	--	FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,121.00

Total 8,124.02

Less : Rounded Off (-) 0.02

336.00 0.00

Grand Total ₹ 8,124.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	5,033.950	604.074	604.074
5%	1,300.000	65.000	65.000
18%	950.000	171.000	171.000
Total	7,283.950	840.074	840.074

Rupees Eight Thousand One Hundred Twenty Four Only



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

Terms & Conditions

E. & 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

Stock/No. of Boxes Received 01
Subject to Physical Check
Name/Employee Code Anita / Dec
Centre Name T. H. Yellapur
Date/Time 13/07/2024 At 11:00
Signature [Signature] M. No. 9686989388