

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/24-25/1107
Date of Invoice : 24-08-2024
Place of Supply : Karnataka (29)
GR/RR No. :
PO NO. : 27174

Transport : N/A
Vehicle No. :
Station : ATHANI
E-Way Bill No. :
PO DATE : 09-08-2024

Billed to : DCDC TALUKA GENERAL HOSPITAL ATHANI
DIALYSIS UNIT, TALUKA GENERAL HOSPITAL N

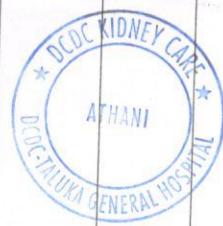
Shipped to : DCDC TALUKA GENERAL HOSPITAL ATHANI
DIALYSIS UNIT, TALUKA HOSPITAL
NEAR KARNATKA BANK, BASWARESHWAR CIRCLE
ATHANI , KARNATKA - 591304

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

Party Mobile No : 9620715281
GSTIN / UIN :
D.L. No. :

ATHANI

Table with 13 columns: S.N., Qty., Free, Pack, Products Name, HSN, Batch No., Exp., MRP, Rate, Dis. %, GST %, Amount(). Rows include SYNTHETIC COVER FOR TROLLY and FREIGHT CHARGES.



Total 1,740.40
Less : Rounded Off (-) 0.40

1.00 0.00

Grand Total 1,740.00

Table with 4 columns: Tax Rate, Taxable Amt., IGST Amt., Total Tax. Rows for 12% and 18% rates, and a Total row.

Rupees One Thousand Seven Hundred Forty 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
Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code : Sagar Kumar
Centre Name : DCDC Taluka Athani
Date/Time : 24/08/2024
Signature : [Signature] M. No. : 961839960
Authorised Signatory