

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/24-25/1741
 Date of Invoice : 26-10-2024
 Place of Supply : Uttar Pradesh (09)
 GR/RR No. :
 PO NO. : 27961

Transport : N/A
 Vehicle No. :
 Station : ALIGARH
 E-Way Bill No. :
 PO DATE : 22-10-2024

Billed to :

DCDC NARAYANI HOSPITAL ALIGARH
 DIALYSIS UNIT, NARAYANI HOSPITAL
 NEAR ATRAULI BUS STAND, GULZAR NAGAR
 ALIGARH , UTTAR PRADESH - 202001

Party Mobile No : 7253990299
 GSTIN / UIN :
 D.L. No. :

Shipped to :

DCDC NARAYANI HOSPITAL ALIGARH
 DIALYSIS UNIT, NARAYANI HOSPITAL
 NEAR ATRAULI BUS STAND, GULZAR NAGAR
 ALIGARH , UTTAR PRADESH - 202001

Party Mobile No : 8218287371
 GSTIN / UIN :
 D.L. No. :

ALIGARH

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	1,000	0		FITSULA NEEDLE 17G	90183290	24100417C	Sep-2027	0.00	11.00	0.00%	12%	12,320.00
2	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,209.50
											Total	13,529.50

Add : Rounded Off (+)

0.50

Grand Total 13,530.00

1,000.00 0.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	11,000.000	1,320.000	1,320.000
18%	1,025.000	184.500	184.500
Total	12,025.000	1,504.500	1,504.500

Rupees Thirteen Thousand Five Hundred Thirty Only

Stock No. / No. of Boxes Received
 Subject to Physical Check Done
 Name/Employee Code D.C.O. 3718
 Centre Name Aligarh
 Date/Time 08-11-2024
 Signature Muneer M. No. 8218287371

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
 Auth. Sign.
 Authorised Signatory
 DELHI