

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/24-25/868
Date of Invoice : 06-08-2024
Place of Supply : Karnataka (29)
GR/RR No. :
PO NO. : 26868

Transport : N/A
Vehicle No. :
Station :
E-Way Bill No. :
PO DATE : 05-08-2024

Billed to :

DCDC TALUKA HOSPITAL NARGUND
DIALYSIS UNIT, TALUKA HOSPITAL DIST- GAD

Shipped to :

DCDC TALUKA HOSPITAL NARGUND
DIALYSIS UNIT, TALUKA HOSPITAL
DIST - GADAG, NARGUND
KARNATKA - 582107

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

Party Mobile No : 9035983362
GSTIN / UIN :
D.L. No. :

NARGUND

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	200	0		IV SET-ECO	90183990	Rem.54115	Jan-2027	0.00	6.50	0.00%	12%	1,456.00
2	200	0		SHOE COVER	39249090			0.00	1.95	0.00%	18%	460.20
3	4	0	1*50	GB MAXIM 10ML SYRINGE	90183100	A110102480	Jan-2029	0.00	175.00	0.00%	12%	784.00
4	1,000	0		NON WOVEN BED SHEET	63071030			0.00	13.00	0.00%	5%	13,650.00
5	100	0		BUFFANT CAP	62103090			0.00	0.90	0.00%	5%	94.50
6	50	0		INJ REVIL	30049039	M040	Mar-2026	0.00	3.30	0.00%	12%	184.80
7	2	0		COITON BALL	56012110			0.00	115.00	0.00%	12%	257.60
8	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	2,908.70

Add : Rounded Off (+) Total 19,795.80
0.20

1,556.00 0.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	2,395.000	287.400	287.400
18%	2,855.000	513.900	513.900
5%	13,090.000	654.500	654.500
Total	18,340.000	1,455.800	1,455.800

Rupees Nineteen Thousand Seven Hundred Ninety Six Only

Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 220712004000035; 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 : 0110001 S bag
Subject to Physical Check : 003430
Name/Employee Code :
Centre Name : Nargund
Date/Time : 20/08/24 5:20
Signature : M. No. 9035983362
DCDC KIDNEY CARE
TH NARGUND
DCDC TALUKA HOSPITAL