

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

1 Box

Invoice No. : AP/24-25/435  
Date of Invoice : 06-06-2024  
Place of Supply : Karnataka (29)  
GR/RR No. :  
PO NO. : 26288

Transport : N/A  
Vehicle No. :  
Station :  
E-Way Bill No. :  
PO DATE : 04-06-2024

**Billed to :**

DCDC TALUKA HOSPITAL CHIKKODI  
DIALYSIS UNIT, TALUKA HOSPITAL MN ROAD,

**Shipped to :**

DCDC TALUKA HOSPITAL CHIKKODI  
DIALYSIS UNIT, TALUKA HOSPITAL  
MN ROAD , NEAR BUS STOP, DIST - BELAGAVI  
CHIKKODI , KARNATAKA - 591201

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

Party Mobile No : 8880215789  
GSTIN / UIN :  
D.L. No. :

CHIKKODI

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	100	0		IV SET-ECO	9018	HCR23030	Feb-2027	0.00	6.50	0.00%	12%	728.00
2	2	0	1*50	CARE DISPO. SYRINGE 10ML 1*50	90183100	B24059	Jan-2027	0.00	175.00	0.00%	12%	392.00
3	1	0	1*100	CARE DISPO. SYRINGE 5ML 1*100	90183100	B24060	Jan-2027	0.00	195.00	0.00%	12%	218.40
4	100	0		FITSULA OFF KIT	30059040			0.00	7.00	0.00%	12%	784.00
5	100	0		FITSULA ON-KIT	30059040			0.00	7.00	0.00%	12%	784.00
6	100	0		NON WOVEN BED SHEET	6307			0.00	13.00	0.00%	5%	1,365.00
7	2	0		EXAM GLOVES (M)	4015			0.00	230.00	0.00%	12%	515.20
8	50	0		BT SET ( NV )	90183990	HCRBT001	Nov-2025	0.00	19.00	0.00%	12%	1,064.00
9	1	0	1*50	INJ Frusamide 1*50 (R) / LASI	3004	FM-126	Jan-2026	0.00	165.00	0.00%	12%	184.80
10	50	0		INJ ONDION ( EMSET )	30049069	MN23337C	Nov-2025	0.00	4.80	0.00%	12%	268.80
11	--	--		FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,398.30

Total 7,702.50

Add : Rounded Off (+)

0.50

506.00 0.00

Grand Total ₹ 7,703.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	4,410.000	529.200	529.200
5%	1,300.000	65.000	65.000
18%	1,185.000	213.300	213.300
<b>Total</b>	<b>6,895.000</b>	<b>807.500</b>	<b>807.500</b>

Stock/No. of Boxes Received ..... 1  
Subject to Physical Check  
Name/Employee Code .....  
Centre Name .....  
Date/Time ..... 11/6/2024  
Signature ..... M. No. 9337903476

Rupees Seven Thousand Seven Hundred Three Only

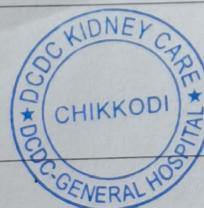
Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000305; IFSC - UJVN002207

## Terms &amp; Conditions

E.&amp; 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

