

GSTIN: D7AAPP6291A1ZR

TAX INVOICE

1 Box
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/24-25/1620	Transport : N/A
Date of Invoice : 22-10-2024	Vehicle No. :
Place of Supply : Telangana (36)	Station :
GR/RR No. :	E-Way Bill No. :
PO NO. : 27733	PO DATE : 04-10-2024

Billed to : DCDC GOVT. GENERAL HOSPITAL JAGTIAL DH, , GOVT. GENERAL HOSPITAL, OPP. JAGTI	Shipped to : DCDC GOVT. GENERAL HOSPITAL JAGTIAL DIALYSIS UNIT, GOVERNMENT HOSPITAL OPP - JAGTIAL MUNICIPAL OFFICE JAGTIAL , TELANGANA - 505327
Party Mobile No : GSTIN / UIN : D.L. No. :	Party Mobile No : 9908470353 GSTIN / UIN : D.L. No. :

JAGTIAL

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	10	0	1*50	HMD 10ML SYRING	90183100	442102JC2	Sep-2029	0.00	247.50	0.00%	12%	2,772.00
2	-	-	-	FREIGHT CHARGES	996812	-	-	0.00	--	0.00%	18%	737.50

Total 3,509.50

Add : Rounded Off (+) 0.50

10.00 0.00 Grand Total ₹ 3,510.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax	Stock/No. of Boxes Received 1 Box 10x50=500
12%	2,475.000	297.000	297.000	Subject to Physical Check
18%	625.000	112.500	112.500	Name/Employee Code Anil DC02809
Total	3,100.000	409.500	409.500	Centre Name Jagtial

Rupees Three Thousand Five Hundred Ten Only
Date/Time 28/10/2024
Signature Anil M.No 9908470353

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 :
	