

GSTIN : 07AAPP6291A1ZR

TAX INVOICE

Duplicate Copy

Anil Pharma

C- 58, Rajan Babu Road,, Adarsh Nagar, Delhi-110033

Tel : 011-41557131 email : anilpharma1997@gmail.com

Drug Licence No. : 208-137393, 218-137394

Invoice No. : AP/24-25/603
Date of Invoice : 05-07-2024
Place of Supply : Delhi (07)
GR/RR No. :
PO NO. : 26768-1

Transport : N/A
Vehicle No. : DL01LQ8103
Station : MOTI NAGAR
E-Way Bill No. : 791440977792
PO DATE : 05-07-2024

Billed to :

DCDC HEALTH SERVICE PVT LTD
C-185 , FIRST FLOOR , MAYAPURI INDUS.
AREA PHASE -2 , MAYAPURI
NEW DELHI-110064

Party Mobile No : 9811561247
GSTIN / UIN :
D.L. No. :

Shipped to :

DCDC HEALTH SERVICE PVT LTD
DIALYSIS UNIT, H-1 KAILASH PARK
NEAR MOTI NAGAR METRO PILLAR NO-330
MOTI NAGAR , NEW DELHI - 110015

Party Mobile No : 8840000500
GSTIN / UIN :
D.L. No. :

MOTI NAGAR

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	4	0	1*50	HBSAG CARD TEST 50TEST FASTVU	30029090	Ohbs-01240	Feb-2026	0.00	550.00	0.00%	2.5%+2.5%	2,310.00
2	4	0	1*50	HCV CARD TEST 50TEST FAST VUE	30029090	Ohcv012400	Feb-2026	0.00	2,650.00	0.00%	2.5%+2.5%	11,130.00
3	4	0	1*50	HIV 1/2 CARD TEST 50TEST FAST	30029090	Ohiv-01240	Feb-2026	0.00	2,600.00	0.00%	2.5%+2.5%	10,920.00

Total 24,360.00

12.00 0.00

Grand Total ₹ 24,360.00

Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
5%	23,200.000	580.000	580.000	1,160.000

Rupees Twenty Four Thousand Three Hundred Sixty Only

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 :

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature M. No. 01148355

For Anil Pharma
Authorised Signatory

