

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/24-25/1212  
Date of Invoice : 10-09-2024  
Place of Supply : Telangana (36)  
GR/RR No. :  
PO NO. : 27418

Transport : N/A  
Vehicle No. :  
Station : SIRCHILLA  
E-Way Bill No. :  
PO DATE : 04-09-2024

**Billed to :**

DCDC GOVT. AREA HOSPITAL SIRCHILLA  
GOVT. AREA HOSPITAL, NEAR AMBEDKAR CHOWK

**Shipped to :**

DCDC GOVT. AREA HOSPITAL SIRCHILLA  
DIALYSIS UNIT, GOVERNMENT HOSPITAL  
NEAR AMBEDKAR CHOWK, SIRCHILLA  
TELANGANA - 505301

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

Party Mobile No : 6304193195  
GSTIN / UIN :  
D.L. No. :

SIRCHILLA

S.N.	Qty.	Free	Pack	Products Name	HSN	Batch No.	Exp.	MRP	Rate	Dis. %	GST %	Amount(₹)
1	900	0		IV SET-ECO	90183990	ELPL/03/32	Feb-2027	0.00	6.50	0.00%	12%	6,552.00
2	1,000	0		SHOE COVER	39249090			0.00	1.95	0.00%	18%	2,301.00
3	1,000	0		FACE MASK 3 PLY EARLOOP BLUE	63079090			0.00	1.50	0.00%	5%	1,575.00
4	500	0		BUFFANT CAP	62103090			0.00	0.90	0.00%	5%	472.50
5	6	0	1*100	GB MAXIM 5ML SYRINGE	90183100	A1052124F0	May-2029	0.00	195.00	0.00%	12%	1,310.40
6	--	--	--	FREIGHT CHARGES	996812			0.00	--	0.00%	18%	1,404.20

Stock/No. of Boxes Received ..... 02  
Subject to Physical Check .....  
Name/Employee Code ..... E. Rham  
Centre Name ..... S.G.H. Sirchilla  
Date/Time ..... 10.09.2024  
Signature ..... (Signature) M. No. 6304193195

Total 13,615.10

Less : Rounded Off (-)

0.10

3,406.00 0.00

Grand Total ₹ 13,615.00

Tax Rate	Taxable Amt.	IGST Amt.	Total Tax
12%	7,020.000	842.400	842.400
18%	3,140.000	565.200	565.200
5%	1,950.000	97.500	97.500
<b>Total</b>	<b>12,110.000</b>	<b>1,505.100</b>	<b>1,505.100</b>

Rupees Thirteen Thousand Six Hundred Fifteen Only

Bank Details : UJJIVAN SMALL FINANCE BANK,; A/c : 2207120040000335; IFSC - UJVN0002207

**Terms & 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

