

SHOP NO.17 ,KUBER LAZA SHOPPING CENTER,BESIDE KOTAK
 MAHINDRA BANK,TEEN RASTA CIRCLE,STATION ROAD,ANKLESHWAR
 GST No. : 07AGAPA5363L002, DL
 No:564654654898788,789654123655847, Contact
 No:7896541231, Email ID: pankaj@ethicsinfotech.in

Debit Note

Purchase Invoice No : 242500002 **Debit Note No.** : DN242500001
Vendor.Name : APARNA MEDICAL **Date** : 02/05/2024
Vendor.Mob No. : 789654123 **Store Code** : SGJAHM0998
Vendor.Gst No : 07aaaaa1234f1z5 **Cust.Drug Lic No.** :
 564654654898788,
Vendor.Address : Skyron building 1021256,,

#	Product	Pack Size	HSN Code	Batch	Exp	Qty	Rate	Disc Amount	Amount	CGST	SGST	IGST	CESS
1	Admine 400 Tab (1*10)	1	30049049	56	6/24	20	250.00	0.00	5000.00	0.000	0.000	250.000	0.000

Tax Details

Tax Type	Amount	Tax %	Tax Total
IGST	5000.00	5.00	250.00
			250.00

Total Amount **5000.00**
CGST **0.00**
SGST **0.00**
IGST **250.00**
CESS **0.00**
Disc.Amt **0**
Round off **0**
Net Amount **5250.00**

 For,
 DAVAINDIA_POS_PROD

Authorised Signature