Sun	pliers	Conv
Sup	pners	copy

/	Original for Buyers



GLAND PHARMA LIMITED

Survey No. 143-148, 150 & 151, Near Gandimaisamma 'X' Road

D.P. Pally, Dundigal Gandimaisamma Mandal

Medchal Malkajgiri District, Hyderabad 500 043

Telangana, India.

Tel: +91-40-30510999, Fax: +91-40-30510800

GSTN Number: 36AAACG8036B1ZZ

CIN: U24239AP1978PLC002276, PAN: AAACG8036B

INVOICE NO:

M011819GIS10221

Authorized Signs

INVOICE DT:

19-Mar-19

P.O NUMBER: NA

TAX INVOICE

Sold To Party: Dr. Reddy's Laboratories Limited

Name & Address: 8-2-337, Road No. 3, Banjara Hills, Hyderabad-34

State Name & Code: Telangana, 36 GST Number: 36AAACD7999Q1ZL PAN Number: AAACD7999Q Place of Supply: DRL-Virtual Plant

Name & Address: Corporate Office,7-1-27,Ameerpet, Hyderabad -16

State Name & Code: Telangana, 36 GST Number: 36AAACD7999Q1ZL PAN Number: AAACD7999Q

Sr.No.	Description of Goods /	Services								SAC Code	Rate	Taxable A	mouont
1	Pharmaceutical produc	t manufacturi	ng service	S						998843			
	Product	Batch No	FGS	C.S.	Q.C.	ID	Customs	Stability	Total				
	Zoledronic acid 4mg/5ml_USA	BR901	15,672	80	86	0	1	С	15,839		25.00	200	076
		•									25.00	3,95,	975
	TOTAL	-	15,672	80	86	0	1	0	15,839				
	ce Payment Details: NIL									Taxab	ole Amount		3,95,97
	nt Terms: 60 Days yment Details									CGST	9%	in Rs	35,638
										SGST	9%	In Rs	35,638
										IGST	18%	In Rs	
	•	2										Total of Tax	71,276
Amoun	nt in words:- Four Lakh S	ixty Seven Th	ousand Tv	vo Hui	ndred F	ifty O	ne Only				Grand Total		4,67,251
	& Condition:	his invoice is no	at navable	under r	avarsa (charge					. 1	or GLAND PHAR	MA LIMITEI
)	y dyna. wide stated tax off t	4	st payable.		270130								

6. I / We certify that my / our registration certificate under the GST Act is in force on the date on which the sale of the goods specified in this Tax Invoice is made by me / us & that the transaction of sale convered by this Tax Invoice has been affected by me / us & the due tax, if any, payable on the sale has been paid or shall be paid.

DATE		PRODUCT NAME	BATCH NO.	MFG. DATE	BATCH EXP. DATE	GOOD C	QUANTII CUSTOM SAMPLES	BATCH GOOD QUANTITY SUMMARY XP. DATE CONTROL CUSTOM LD STABIL SAMPLES SAMPLES SAMPLES SAMP	MARY STABILITY SAMPLES	O.C SAMPLES	OTHERS (IF ANY)	FG QUANTITY	TOTAL QUANTITY	, REMARKS
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		1												

Checked By:

Prepared By: 146