



ANIL PHARMA

RAJAN BABU ROAD,
 ADARSH NAGAR, DELHI - 110033
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GST INVOICE

Duplicate for Transporter

BILL TO :

DCDC DISTRICT HOSPITAL MAINPURI
 DIALYSIS CENTER, MAHARAJA TEJ PRATAP
 SINGH DISTRICT HOSPITAL, MAINPURI State : 09
 UTTAR PRADESH-205001
 PHONE : 9713740406

Invoice No	A000572	L.R. No.	
Invoice Date	25-07-2023	L.R. Date	25-07-2023
P.O. No.	23196	Cases	0
P.O. Date	05-07-2023	Due Date	22-11-2023

Transport :-
 E-WAY BILL NO :-
 VEHICLE NO. :-
 STATION :- 09-UTTAR PRADESH

SHIPPED TO

Name :- DISTRICT HOSPITAL
 ADDRESS :- DIALYSIS UNIT , MAHARAJA TEJ PRATAP3
 SINGH DISTRICT HOSPITAL , MAINPURI
 UTTAR PRADESH - 205001
 NUMBER :- 9713740406

HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
0189029	BLUE PUNCTURE 10LTR		10					0.00	240.00	0.00	12.00	288.00	0.00	2400.00
0059040	FITSULA OFF KIT		1000		0.00			0.00	8.00	0.00	12.00	960.00	0.00	8000.00
0059040	FITSULA ON-KIT		1000		0.00			0.00	8.00	0.00	12.00	960.00	0.00	8000.00
018	HYPODERMIC STERILE SYRINGE 5ML	1*100	8		26706023		5/28	0.00	195.00	0.00	12.00	187.20	0.00	1560.00
004	INJ ATROPINE SULPHATE 1ML*100	1*100	1		AT-169		1/25	0.00	288.00	0.00	5.00	14.40	0.00	288.00
004	INJ BIO CETAMOL (PYREMOL) 2ML 1		100		Q22AM065		1/24	0.00	5.10	0.00	12.00	61.20	0.00	510.00
0043913	INJ MEPDEX (DEXA)		50		MN23116B		4/25	0.00	7.00	0.00	12.00	42.00	0.00	350.00
0049009	INJ ONDION (EMSET)		100		Q23AM016		12/24	0.00	4.80	0.00	12.00	57.60	0.00	480.00
018	IV SET-ECO		800		HCR23007		4/26	0.00	6.50	0.00	12.00	624.00	0.00	5200.00
808	KLACII LIQUID HAND SANITIZER 5		5		HS021L			0.00	580.00	0.00	18.00	522.00	0.00	2900.00
005	MICROPORE 3"		32		2305044		4/26	0.00	75.00	0.00	12.00	288.00	0.00	2400.00
018	NEEDLE CUTTER 3LTR		2					0.00	2300.00	0.00	12.00	552.00	0.00	4600.00
018	SHARP CONTAINER PLASTIC 3LTR		10		0.00			0.00	150.00	0.00	12.00	180.00	0.00	1500.00
96812	Add FREIGHT CHARGES							0.00	2205.00	0.00	18.00	396.90	0.00	2205.00

Stock/No. of Boxes Received 7
 Subject to Physical Check
 Name/Employee Code S.H.
 Centre Name Mainpuri
 Date/Time 28/7/2023
 Signature S.H. M. No. 9713740406

TAX	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL	40393.00
T 5.00%	288.00	0.00	0.00	14.40	0.00	14.40	Total Items :- 14
T 12.00%	3500.00	0.00	0.00	4200.00	0.00	4200.00	Total Qty :- 3118
T 18.00%	5105.00	0.00	0.00	918.90	0.00	918.90	
T 28 %	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	40393.00	0.00	0.00	5133.30	0.00	5133.30	

DIS AMT.	0.00
IGST PAYBLE	5133.30
PAYBLE	0.00
Round off	-0.30
CR/DR NOTE	0.00
	0.00

Forty Five Thousand Five Hundred Twenty Six Only

BANK DETAILS AS :-

Name : UJJIVAN SMALL FINANCE BANK
 Branch Name : ADARSH NAGAR
 Account No. : 2207120040000335
 Code : UJVN0002207

Terms & Conditions

Once sold will not be taken back or exchanged.
 Not paid due date will attract 24% interest.
 Disputes subject to Jurisdiction only.

FOR ANIL PHARMA



Authorised Signatory

Stock/No. of Boxes Received 7
 Subject to Physical Check
 Name/Employee Code S.H.
 Centre Name Mainpuri
 Date/Time 28/7/2023
 Signature S.H. M. No. 9713740406

Grand Total

45526.00