



ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
D.L.No : 20B-137393 | 21B-137394
GSTIN : 07AAPP6291A1ZR
E-Mail : anilpharma1997@gmail.com

GST INVOICE

Invoice No	A000675	Bill No.	
Invoice Date	11-08-2023	L.R. Date	11-08-2023
P.O. No.	23397	Cases	0
P.O. Date	08-08-2023	Due Date	09-12-2023

Transport :-
E-WAY BILL NO :-
VEHICLE NO. :-
STATION :- 20-JHARKHAND

Duplicate for Transporter

BILL TO :
DCDC SADAR HOSPITAL DHANBAD
SADAR HOSPITAL , NEAR COURT,
DHANBAD , JHARKHAND State : 20
826001
PHONE : 9504172351

SHIPPED TO
Name :- SADAR HOSPITAL
Address:- DIALYSIS UNIT , SADAR HOSPITAL
NEAR COURT , DHANBAD
JHARKHAND - 826001
NUMBER :- 9504172351

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	30049099	INJ HOSTRANIL 25000 IU		100		HIHE23010A		5/25	0.00	130.00	0.00	12.00	1560.00	0.00	0.00	13000.00

Stock/No. of Boxes Received 02
Subject to Physical Check
Name/Employee Code 2000811
Centre Name Sadar Hospital Dhanbad
Date/Time 17/08/23
Signature M. No. 9504172351

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items	Total Qty	DIS AMT.	IGST PAYBLE	PAYBLE	Round off	CR/DR NOTE
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	1	100	0.00	1560.00	0.00	0.00	0.00
IGST 12.00%	13000.00	0.00	0.00	1560.00	0.00							
IGST 18.00%	0.00	0.00	0.00	0.00	0.00							
IGST 28 %	0.00	-0.00	0.00	0.00	0.00							
TOTAL	13000.00	0.00	0.00	1560.00	1560.00							

Rs. Fourteen Thousand Five Hundred Sixty Only
OUR BANK DETAILS AS :-
Bank Name : UJJIVAN SMALL FINANCE BANK
Branch Name : ADARSH NAGAR
Account No. : 2207120040000335
IFSC Code : UJVN0002207

Terms & Conditions
Goods once sold will not be taken back or exchanged.
Bills not paid due date will attract 24% interest
All disputes subject to Jurisdiction only.

FOR ANIL PHARMA
Auth Signatory

Authorised Signatory

Grand Total
14560.00