



ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
D.L.No. : 20B-137393 \ 21B-137394
GSTIN : 07AAPPG6291A1ZR
E-Mail : anilpharma1997@gmail.com

GST INVOICE

Duplicate for Transporter

BILL TO :

DCDC AVADH HOSPITAL SINGAR NAGAR
DIALYSIS UNIT , AVADH HOSPITAL
AVADH CHAURAHA , SINGAR NAGAR State : 09
ALAM BAGH, UTTAR PRADESH - 226005
PHONE. : 8299073411,8299073411

Invoice No	A001733	Bill No.	
Invoice Date	19-01-2024	L.R. Date	19-01-2024
P.O. No.	24822	Cases	1
P.O. Date	05-01-2024	Due Date	18-05-2024

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

SHIPPED TO

Name :- AVADH HOSPITAL
Address:- DIALYSIS UNIT, AVADH HOSPITAL
AVADH CHAURAHA , SINGAR NAGAR
UTTAR PRADESH - 226005
NUMBER :- 8299073411

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	30059040	FITSULA OFF KIT		900		0.00			0.00	7.85	0.00	12.00	847.80	0.00	0.00	7065.00
2	996812	Add FREIGHT CHARGES							0.00	1590.00	0.00	18.00	286.20	0.00	0.00	1590.00

DCDCHSPL CENTRE-AVADH HOSPITAL, LUCKNOW
MATERIAL RECEIVED
DATE: 23/1/24
TIME: 5:00 PM RECEIVED BY: *Parshu Singh*

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	8655.00
IGST 12.00%	7065.00	0.00	0.00	847.80	847.80	DIS AMT. 0.00
IGST 18.00%	1590.00	0.00	0.00	286.20	286.20	IGST PAYBLE 1134.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00	PAYBLE 0.00
TOTAL	8655.00	0.00	0.00	1134.00	1134.00	Round off 0.00

Rs. Nine Thousand Seven Hundred Eighty Nine Only

OUR BANK DETAILS AS :-

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

FOR ANIL PHARMA

Authorised Signatory

Grand Total

9789.00

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.