



ANIL PHARMA

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

GST INVOICE

Invoice No : A000248
Invoice Date : 17-05-2023
P.O. No. : 22504-1
P.O. Date : 04-05-2023
Transport :-
E-WAY BILL NO. :-
VEHICLE NO. :-
STATION :- 06-HARYANA

L.R. No. :
L.R. Date : 17-05-2023
Cases : 0
Due Date : 14-09-2023

BILL TO :
DCDC CIVIL HOSPITAL JIND
CIVIL HOSPITAL
JIND - GOHANA ROAD, JIND State 06
HARYANA-126102
PHONE 8506000584

SHIPPED TO
CIVIL HOSPITAL
DIALYSIS UNIT, CIVIL HOSPITAL
JIND GOHANA ROAD, JIND
HARYANA-126102
NUMBER :- 8295012840

S.N	HSN	Product Name	CLASS	TOTAL	SCHEME	DISCOUNT	IGST	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	90189029	BLUE PUNCTURE 10LTR		1175.00	0.00	0.00	58.75	1*50	5		5P62200659	2/22	1/27	0.00	240.00	0.00	12.00	144.00	0.00	120
2	3004	CIPLADINE OINTMENT		47120.00	0.00	0.00	5654.40	1*100	8		51812022	1/23	11/27	0.00	195.00	0.00	12.00	187.20	0.00	15
3	3005	DYNAPLAST		12.00	0.00	0.00	0.00	1*50	2		SPB 220050	9/22	2/24	0.00	5.10	0.00	12.00	91.80	0.00	7
4	4015	EXAM GLOVES (M)		3480.00	0.00	0.00	626.40	1*50	2		KE-89	11/24	11/24	0.00	230.00	0.00	12.00	55.20	0.00	4
5	30059040	FITSULA OFF KIT		0.00	0.00	0.00	0.00	1*50	2		FM-122	9/24	9/24	0.00	165.00	0.00	12.00	39.60	0.00	3
6	30059040	FITSULA ON KIT		0.00	0.00	0.00	0.00	1*50	10		00912308F	2/23	2/25	0.00	23.50	0.00	5.00	58.75	0.00	11
7	9018	GREEN LIFE 10ML SYR		0.00	0.00	0.00	0.00	1*50	1		FN-361	12/24	12/24	0.00	7.00	0.00	12.00	84.00	0.00	7
8	9018	HYPODERMIC STERILE SYRINGE 5ML		0.00	0.00	0.00	0.00	1*50	1		O23AM016	12/24	12/24	0.00	4.80	0.00	12.00	57.60	0.00	7
9	3004	INJ BIOCETAMOL (PYREMOL) 2ML 1		0.00	0.00	0.00	0.00	1*50	1		D1012332F	2/25	2/25	0.00	14.30	0.00	12.00	171.60	0.00	14
10	30049099	INJ ETOPHYLINE & THEOPHYLINE 1		0.00	0.00	0.00	0.00	1*50	1		PH-488	11/24	11/24	0.00	165.00	0.00	12.00	19.80	0.00	14
11	3004	INJ FRUSAMIDE 1*50 (R) / LASI		0.00	0.00	0.00	0.00	1*50	1		NZL1-001	1/25	1/25	0.00	38.50	0.00	12.00	46.20	0.00	14
12	3004	INJ MEPEDEX (DEXA)		0.00	0.00	0.00	0.00	1*50	1					0.00	165.00	0.00	12.00	19.80	0.00	14
13	30043913	INJ ONDION (EMSET)		0.00	0.00	0.00	0.00	1*50	1					0.00	165.00	0.00	12.00	19.80	0.00	14
14	30049069	INJ PANTAPROZOLE 40MG		0.00	0.00	0.00	0.00	1*50	1					0.00	165.00	0.00	12.00	19.80	0.00	14
15	3004	INJ REVIL 1*50 (R)		0.00	0.00	0.00	0.00	1*50	1					0.00	165.00	0.00	12.00	19.80	0.00	14
16	3004	INJ ZINOCAINE (LOX 2%)		0.00	0.00	0.00	0.00	1*50	1					0.00	165.00	0.00	12.00	19.80	0.00	14
17	30049068	INJ ZINOCAINE (LOX 2%)		0.00	0.00	0.00	0.00	1*50	1					0.00	165.00	0.00	12.00	19.80	0.00	14
18	3808	KLACII LIQUID HAND SANITIZER 5		0.00	0.00	0.00	0.00	1*50	6					0.00	580.00	0.00	18.00	626.40	0.00	3
TOTAL				51775.00	0.00	0.00	6339.55								6339.55			6339.55		51

Res. Eighty Nine Thousand Eight Hundred Eighty One Only

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

Stock/No. of Boxes Received : 51
Subject to Physical Check :
Name/Employee Code :
Centre Name :
Date/Time :
Signature :
M. No. :
Authorized Signatory

FOR ANIL PHARMA
Signature :
M. No. :
Authorized Signatory

Continue Page



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ADARSH NAGAR, DELHI - 110033
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GST INVOICE

Duplicate for Transporter

BILL TO :
DCDC CIVIL HOSPITAL JIND
CIVIL HOSPITAL
JIND - GOHANA ROAD, JIND State : 06
HARYANA-126102
PHONE : 8506000584

Invoice No	A000248	L.R. No.	17-05-2023
Invoice Date	17-05-2023	L.R. Date	0
P.O. No.	22504-1	Cases	14-09-2023
P.O. Date	04-05-2023	Due Date	

Transport :-
E-WAY BILL NO :-
VEHICLE NO. :-
STATION :- 06-HARYANA

SHIPPED TO
Name :- CIVIL HOSPITAL
ADDRESS :- DIALYSIS UNIT, CIVIL HOSPITAL
JIND GOHANA ROAD, JIND
HARYANA-126102
NUMBER :- 8295012840

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
19	3005	MICROPORE 3"													
20	30049087	POVINANZ M/B POWDER		80		2302282		1/26	0.00	75.00	0.00	12.00	720.00	0.00	0.00
21	9018	SHARP CONTAINER PLASTIC 3LTR		50		PNP-009	2/23	12/25	0.00	15.00	0.00	12.00	90.00	0.00	0.00
22	4015	SURGICARE GLOVES 7NO		10		0.00			0.00	150.00	0.00	12.00	180.00	0.00	0.00
23	4015	SURGICAREGLOVES 7.5		100		0.00			0.00	16.00	0.00	12.00	192.00	0.00	0.00
24	30049076	TAB ARKAMIN (CLODICT)		100		0.00			0.00	16.00	0.00	12.00	192.00	0.00	0.00
25	30049039	TAB PEPTILCER40 MG (PANTOSEC)		400		22JT1262 A	12/22	9/25	0.00	38.00	0.00	12.00	1824.00	0.00	0.00
				50		SPA222586	3/23	11/24	0.00	34.25	0.00	12.00	205.50	0.00	0.00

Stock/No. of Boxes Received 80, 50, 10, 100, 100, 400, 50
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature M. No.

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	1175.00	0.00	0.00	58.75	0.00	80137.50
IGST 12.00%	75482.50	0.00	0.00	9057.90	0.00	9743.05
IGST 18.00%	3480.00	0.00	0.00	626.40	0.00	0.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	80137.50	0.00	0.00	9743.05	0.00	9743.05

Rs. Eighty Nine Thousand Eight Hundred Eighty One Only

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

FOR ANIL PHARMA

Authorized Signatory

Grand Total

89881.00

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