



ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
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D.L.No. : 20B-137393 \ 21B-137394
GSTIN : 07AAPP6291A1ZR
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GST INVOICE

Duplicate for Transporter

BILL TO :
DCDC REGIONAL HOSPITAL UNA
REGIONAL HOSPITAL UNA, HAMIRPUR ROAD
UNA, HP State : 02

PHONE : 8506007744

| | | | |
|--------------|------------|-----------|------------|
| Invoice No | A000683 | Bill No. | 11-08-2023 |
| Invoice Date | 11-08-2023 | L.R. Date | 11-08-2023 |
| P.O. No. | 23457 | Cases | 5 |
| P.O. Date | 07-08-2023 | Due Date | 09-12-2023 |

Transport :- DELHIVERY PRIVATE LIMITED
E-WAY BILL NO:01359014253
VEHICLE NO. :-
STATION :- 02-HIMACHAL PRADES

SHIPPED TO
REGIONAL HOSPITAL
DIALYSIS UNIT, REGIONAL HOSPITAL
HAMIRPUR ROAD, UNA
HIMACHAL PRADESH - 174303
NUMBER :- 85060007744

| S.N | HSN | Product Name | Pack | Qty | Free | Batch | Mfg | Exp | M.R.P | Rate | Dis | IGST | Value | Value | Amount |
|--------------|----------|--------------------------------|------|------|------|------------|------|-------|-------|----------|------|-------|---------|-------|----------|
| 1 | 4015 | EXAM GLOVES (M) | | 30 | | 0.00 | | | 0.00 | 230.00 | 0.00 | 12.00 | 828.00 | 0.00 | 6900.00 |
| 2 | 30059040 | FITSULA OFF KIT | | 800 | | 0.00 | | | 0.00 | 8.00 | 0.00 | 12.00 | 768.00 | 0.00 | 6400.00 |
| 3 | 30059040 | FITSULA ON-KIT | | 800 | | 0.00 | | | 0.00 | 8.00 | 0.00 | 12.00 | 768.00 | 0.00 | 6400.00 |
| 4 | 3004 | INJ BIOCETAMOL (PYREMOL) 2ML 1 | | 100 | | 022AM065 | | 1/24 | 0.00 | 5.10 | 0.00 | 12.00 | 61.20 | 0.00 | 510.00 |
| 5 | 3004 | INJ DOPMINE 200MG 1*5 (DOMIN) | | 25 | | A22571B | | 10/24 | 0.00 | 16.00 | 0.00 | 5.00 | 20.00 | 0.00 | 400.00 |
| 6 | 30049099 | INJ MIDAZOLAM 10ML (MIDFIX) | | 20 | | AL2033 | | 10/24 | 0.00 | 45.50 | 0.00 | 12.00 | 109.20 | 0.00 | 910.00 |
| 7 | 3004 | INJ PANTARPROZOLE 40MG | | 50 | | 23GF07M | | 5/25 | 0.00 | 14.30 | 0.00 | 12.00 | 85.80 | 0.00 | 715.00 |
| 8 | 3004 | INJ S.B.C 10ML 1*50 (R) | 1*50 | 1 | | SB-278 | 2/23 | 10/24 | 0.00 | 305.00 | 0.00 | 12.00 | 36.60 | 0.00 | 305.00 |
| 9 | 9018 | IV SET-ECO | | 1000 | | HCR23007 | | 4/26 | 0.00 | 6.50 | 0.00 | 12.00 | 780.00 | 0.00 | 6500.00 |
| 10 | 30039084 | LOX SPRAY 10% | | 10 | | KPNP736006 | | 4/25 | 0.00 | 360.00 | 0.00 | 12.00 | 432.00 | 0.00 | 3600.00 |
| 11 | 3005 | MICROPORE 3" | | 52 | | 2307083 | | 6/26 | 0.00 | 75.00 | 0.00 | 12.00 | 468.00 | 0.00 | 3900.00 |
| 12 | 30049076 | TAB ARKAMIN (CLODICT) | | 10 | | 23DT0506A | | 3/26 | 0.00 | 38.00 | 0.00 | 12.00 | 45.60 | 0.00 | 380.00 |
| 13 | 996312 | Add FREIGHT CHARGES | | | | | | | 0.00 | 2260.00 | 0.00 | 18.00 | 406.80 | 0.00 | 2260.00 |
| TOTAL | | | | | | | | | | 39180.00 | 0.00 | 20.00 | 4809.20 | 0.00 | 39180.00 |

DCDC HSP CENTRE-REGIONAL HOSPITAL, UNA
MATERIAL RECEIVED
DATE: 16/8/23
12:30 PM RECEIVED BY: [Signature]
No of boxes 5

FOR ANIL PHARMA

Auth. Sign
Authorized Signatory
ANIL PHARMA
DELHI

Grand Total

43989.00

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.