

Duplicate for Transporter

GST INVOICE

BILL TO :
 CDCDC AREA HOSPITAL VEMULAWADA
 CDCDC DIALYSIS CENTER, AREA HOSPITAL
 VEMULAWADA, RAJANNA SIRCILLA DIST State : 36
 TELANGANA - 505302
 PHONE. : 8588850032

SHIPPED TO
 Name :- AREA HOSPITAL
 Address:- DIALYSIS UNIT, AREA HOSPITAL
 TELANGANA - 505302
 NUMBER :- 9676237955

Invoice No	A001452	Bill No.	
Invoice Date	13-12-2023	L.R. Date	13-12-2023
P.O. No.	24422	Cases	0
P.O. Date	07-12-2023	Due Date	11-04-2024

Transport :- DELHIVERY PRIVATE LIMITED
 E-WAY BILL NO :-
 VEHICLE NO. :-
 STATION :- 36-TELANGANA



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

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	4015	EXAM GLOVES (S)		50		0.00			0.00	230.00	0.00	12.00	1380.00	0.00	11500.00	
2	4015	EXAM GLOVES (M)		40					0.00	230.00	0.00	12.00	1104.00	0.00	9200.00	
3	9018	HYPODERMIC STERILE SYRINGE 5ML	1*100	6		51510023		11/27	0.00	195.00	0.00	12.00	140.40	0.00	1170.00	
4	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	12		34707023		6/28	0.00	175.00	0.00	12.00	252.00	0.00	2100.00	
5	30049069	INJ ETOPHYLINE & THEOPHYLINE 1	1*50	1		RE-90		3/25	0.00	230.00	0.00	12.00	27.60	0.00	230.00	
6	3004	INJ FRUSAMIDE 1*50 (R) / LASI	1*50	1		FM-123		3/25	0.00	165.00	0.00	12.00	19.80	0.00	165.00	
7	3004	INJ HYDROCOTISONE 100MG (EFFCO		100		MN23205A		8/25	0.00	23.50	0.00	5.00	117.50	0.00	2350.00	
8	30049069	INJ ONDION (EMSET)		100		MN23214A		8/25	0.00	4.80	0.00	12.00	57.60	0.00	480.00	
9	9018	IV SET-ECO		600		HCR23007		4/26	0.00	6.50	0.00	12.00	468.00	0.00	3900.00	
10	3005	MICROPORE 2"		48		2307068		6/26	0.00	46.60	0.00	12.00	268.42	0.00	2236.80	
11	998812	Add FREIGHT CHARGES							0.00	2695.00	0.00	18.00	485.10	0.00	2695.00	
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