



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	A002004	Bill No.	
Invoice Date	11-03-2024	L.R. Date	11-03-2024
P.O. No.	25454	Cases	0
P.O. Date	05-03-2024	Due Date	09-07-2024

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

BILL TO :
DCDC YATHARTHA NOIDA
YATHARTHA HOSPITAL NOIDA
PLOT NO - 01 , SECTOR 110 State : 09
MAHARISHI ASHRAM, NOIDA ,UP-201304
PHONE. : 7697109398

SHIPPED TO
Name :- YATHARTH HOSPITAL
Address:- DIALYSIS UNIT, YATHARTH HOSPITAL
PLOT-01, SECTOR-110, MAHARISHI ASHRAM
NOIDA , UTTAR PRADESH - 201304
NUMBER :- 7697109398

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)		60					0.00	230.00	0.00	12.00	1656.00	0.00	0.00	13800.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL	13800.00	
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	DIS AMT.	0.00	
IGST 12.00%	13800.00	0.00	0.00	1656.00	0.00	IGST PAYBLE	1656.00	
IGST 18.00%	0.00	0.00	0.00	0.00	0.00	PAYBLE	0.00	
IGST 28 %	0.00	0.00	0.00	0.00	0.00	Round off	0.00	
TOTAL	13800.00	0.00	0.00	1656.00	0.00	1656.00	CR/DR NOTE	0.00

Rs. Fifteen Thousand Four Hundred Fifty Six 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.

Stock No. of Boxes Received
Subject to Physical Check
Name/Employee Code ..DC01102
Centre Name ..YATHARTH HOSPITAL
Date/Time ..11/03/2024/12:00 PM
SignatureM. No.....
NILL

FOR ANIL PHARMA



Authorised Signatory

Grand Total

15456.00