



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	A001528	Bill No.	
Invoice Date	18-12-2023	L.R. Date	18-12-2023
P.O. No.	24458	Cases	0
P.O. Date	07-12-2023	Due Date	16-04-2024

Transport :-
E-WAY BILL NO :-
VEHICLE NO. :-
STATION :- 07-DELHI

BILL TO :
DODC HEALTH SERVICES PVT. LTD.
C-185, FIRST FLOOR, MAYAPURI INDUS.
AREA PHASE -2, MAYAPURI State : 07
NEW DELHI-110064
PHONE. : 9811561247

SHIPPED TO
Name :- TARAK HOSPITAL
Address:- DIALYSIS UNIT, TARAK HOSPITAL
G-7 JAI BHARAT ENCLAVE, NAJAFG
DWARAKA, NEW DELHI - 110059
NUMBER :- 8929037740

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	SGST	Value	CGST	Value
1	3005	DYNAPLAST		1		EAB29	3/21	1/24	0.00	149.50	0.00	6.00	8.97	6.00	8.97
2	4015	EXAM GLOVES (M)		20					0.00	230.00	0.00	6.00	276.00	6.00	276.00
3	63079090	FACE MASK 3 PLY EARLOOP BLUE		100		0.00			0.00	1.50	0.00	2.50	3.75	2.50	3.75
4	30059040	FITSULA OFF KIT		500		0.00			0.00	8.00	0.00	6.00	240.00	6.00	240.00
5	30059040	FITSULA ON-KIT		500		0.00			0.00	8.00	0.00	6.00	240.00	6.00	240.00
6	9018	HYPODERMIC STERILE SYRINGE 5ML		3	1**100	51510023		11/27	0.00	195.00	0.00	6.00	35.10	6.00	35.10
7	3004	INJ PANTAPROZOLE 40MG		50		MAN23204B		8/25	0.00	14.30	0.00	6.00	42.90	6.00	42.90
8	9018	IV SET-ECO		300		HCR23016		6/26	0.00	6.50	0.00	6.00	117.00	6.00	117.00
9	3005	MICROBORE 3"		20		2310151		9/26	0.00	75.00	0.00	6.00	90.00	6.00	90.00
10	30049087	POVINANZ M/B POWDER		10		N0130500		7/26	0.00	15.00	0.00	6.00	9.00	6.00	9.00
11	9018	SHARP CONTAINER PLASTIC 3LTR		2		0.00			0.00	150.00	0.00	6.00	18.00	6.00	18.00
12	3901	SHOE COVER		500		0.00			0.00	1.95	0.00	9.00	87.75	9.00	87.75
TOTAL															

Rs. Twenty One Thousand Four Hundred Eleven 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 : 2 Box

Subject to Physical Check

Name/Employee Code : Shri. M. Hasnain

Centre Name : Anil Pharma

Date/Time : 20/12/23 11:40 Am

Signature : M. No 7906730829

FOR ANIL PHARMA



Authorized Signatory

TOTAL	DIS AMT.	8.97
	SGST PAYABLE	6.00
	CGST PAYABLE	6.00
	Round off	0.00
	CR/DR NOTE	

Grand Total

21411