



# 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	A001511	Bill No.	
Invoice Date	15-12-2023	L.R. Date	15-12-2023
P.O. No.	24485	Cases	0
P.O. Date	07-12-2023	Due Date	13-04-2024

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

**BILL TO :**  
DCDC DISTRICT HOSPITAL KUSHINAGAR  
COMBINED DISTRICT HOSPITAL  
RABINDRA NAGAR ROAD, State 09  
RABINDRA NAGAR DHOOS KUSHI NAGAR  
PHONE : 8506007856

### SHIPPED TO

Name :- DISTRICT HOSPITAL  
Address :- DIALYSIS UNIT, DISTRICT HOSPITAL  
RAVINDARA DHUS, PADRAUNA, KUSHINAGAR  
UTTAR PRADESH - 274304  
NUMBER :- 8506007855

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	30059040	FITSULA OFF KIT		2000 ✓		0.00			0.00	8.00	0.00	12.00	1920.00	0.00	16000.00
2	30059040	FITSULA ON-KIT		1000 ✓		0.00			0.00	8.00	0.00	12.00	960.00	0.00	8000.00
3	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	20 ✓		51010023		9/28	0.00	175.00	0.00	12.00	420.00	0.00	3500.00
4	9018	IV SET-ECO		1000 ✓		HCR23016		6/26	0.00	6.50	0.00	12.00	780.00	0.00	6500.00
5	996812	Add FREIGHT CHARGES							0.00	3045.00	0.00	18.00	548.10	0.00	3045.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	5		DIS AMT 0.00
IGST 12.00%	34000.00	0.00	0.00	4080.00	0.00	4020		IGST PAYBLE 4628.10
IGST 18.00%	3045.00	0.00	0.00	548.10	0.00			PAYBLE 0.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00			Round off -0.10
<b>TOTAL</b>	<b>37045.00</b>	<b>0.00</b>	<b>0.00</b>	<b>4628.10</b>	<b>4628.10</b>			CR/DR NOTE <b>0.00</b>

Rs. Forty One Thousand Six Hundred Seventy Three 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 3 Box  
Subject to Physical Check 3 Box  
Name/Employee Code Ajij Kumar 02119  
Centre Name DCH: Kushinagar  
Date/Time 20/12/23 10:00 AM  
Signature [Signature] M. No. 8919001011

FOR ANIL PHARMA

Authorised Signatory

Grand Total

41673.00

