



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

Page No :2

Original for Buyer

Invoice No	A001874	Bill No.	
Invoice Date	10-02-2024	L.R. Date	10-02-2024
P.O. No.	25100	Cases	5
P.O. Date	06-02-2024	Due Date	09-06-2024

BILL TO :
DCDC DISTRICT HOSPITAL KASGANJ
DIALYSIS CENTER, DDISTRICT HOSPITAL
VILLAGE MOMMONM DIST. KASGANJ State : 09
UTTAR PRADESH-207123
PHONE : 9584802753

SHIPPED TO
Name :- DISTRICT HOSPITAL
Address:- DIALYSIS UNIT, DISTRICT HOSPITAL
VILLAGE MAMMON , NEAR DISTRICT COURT
KASGANJ , UTTAR PRADESH - 207123
NUMBER :- 9584802753

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

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
19	3005	MICROPORE 3"		48		2312223		11/26	0.00	75.00	0.00	12.00	432.00	0.00	3600.00
20	30049087	POVINANZ M/B POWDER		50		N0140108		12/26	0.00	15.00	0.00	12.00	90.00	0.00	750.00
21	30049076	TAB ARKAMIN (CLODICT)		10		0.00			0.00	26.00	0.00	12.00	31.20	0.00	260.00
22	9018	VACCUTAINER ED7A		100		0.00			0.00	6.00	0.00	12.00	72.00	0.00	600.00
23	9018	VACCUTAINER PLAIN		100		0.00			0.00	5.50	0.00	12.00	66.00	0.00	550.00
24	996812	Add FREIGHT CHARGES							0.00	1945.00	0.00	18.00	350.10	0.00	1945.00
													TOTAL		23583.00

Check/No. of Boxes Received 5
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature M No.

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-
IGST 5.00%	1288.00	0.00	0.00	64.40	0.00	24	
IGST 12.00%	28055.00	0.00	0.00	3366.60	64.40	1546	
IGST 18.00%	1945.00	0.00	0.00	350.10	3366.60		
IGST 28 %	0.00	0.00	0.00	0.00	350.10		
TOTAL	31288.00	0.00	0.00	3781.10	3781.10		

TOTAL	31288.00
DIS AMT.	0.00
IGST PAYBLE	3781.10
PAYBLE	0.00
Round off	-0.10
CR/DR NOTE	0.00
Grand Total	35069.00

OUR BANK DETAILS AS :-
Bank Name : UJJIVAN SMALL FINANCE BANK
Branch Name : ADARSH NAGAR
Account No. : 2207120040000335
IFSC Code : UJVN0002207

FOR ANIL PHARMA

Authorised Signatory

Terms & Conditions
Goods once sold will not be taken back or exchanged.
Bills not paid due date will attract 24% interest.
Subject to Jurisdiction only.



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

Original for Buyer

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DIALYSIS CENTER, DDISTRICT HOSPITAL
VILLAGE MOMMONM DIST. KASGANJ State : 09
UTTAR PRADESH-207123
PHONE. : 9584802753

SHIPPED TO

Name :- DISTRICT HOSPITAL
Address:- DIALYSIS UNIT, DISTRICT HOSPITAL
VILLAGE MAMMON , NEAR DISTRICT COURT
KASGANJ , UTTAR PRADESH - 207123
NUMBER :- 9584802753

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	3005	DYNAPLAST		10					0.00	149.50	0.00	12.00	179.40	0.00	1495.00
2	4015	EXAM GLOVES (M)		30					0.00	230.00	0.00	12.00	828.00	0.00	6900.00
3	63079090	FACE MASK 3 PLY EARLOOP BLUE		400		0.00			0.00	1.50	0.00	5.00	30.00	0.00	600.00
4	3005	G PLAST		30		2311BD0		10/28	0.00	68.00	0.00	12.00	244.80	0.00	2040.00
5	9018	HYPODERMIC STERILE SYRINGE 5ML	1*100	3		51210023		11/27	0.00	195.00	0.00	12.00	70.20	0.00	585.00
6	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	14		68012023		11/28	0.00	175.00	0.00	12.00	294.00	0.00	2450.00
7	3004	INJ ADRENALINE1ML 1*50(R)	1*50	1		AD-195		9/24	0.00	245.00	0.00	12.00	29.40	0.00	245.00
8	3004	INJ ATROPINE SULPHATE 1ML*100	1*100	1		AT-171		6/25	0.00	288.00	0.00	5.00	14.40	0.00	288.00
9	3004	INJ BIOCETAMOL (PYREMOL) 2ML 1		100		J23AM352		9/25	0.00	5.10	0.00	12.00	61.20	0.00	510.00
10	30049039	INJ CALCIUM GLOCONATE 10ML 1*5	1*50	1		CG-384		8/25	0.00	290.00	0.00	12.00	34.80	0.00	290.00
11	3004	INJ DOPMINE 200MG 1*5 (DOMIN)		25		A23342C		8/25	0.00	16.00	0.00	5.00	20.00	0.00	400.00
12	3004	INJ FRUSAMIDE 1*50 (R) / LASI	1*50	1		FM-125		9/25	0.00	165.00	0.00	12.00	19.80	0.00	165.00
13	3004	INJ MEDARONE 3ML (CORDRONE)		50		A23447B		10/25	0.00	50.00	0.00	12.00	300.00	0.00	2500.00
14	30043913	INJ MEPDEX (DEXA)		50		MN23233E		8/25	0.00	7.00	0.00	12.00	42.00	0.00	350.00
15	30049099	INJ MIDAZOLAM 10ML (MIDFIX)		20		P4013		12/25	0.00	45.50	0.00	12.00	109.20	0.00	910.00
16	30049099	INJ POTASSIUM CHILORIDE10ML 1*	1*50	1		PC-206		8/25	0.00	300.00	0.00	12.00	36.00	0.00	300.00
17	3004	INJ S.B.C 10ML 1*50 (R)	1*50	1		SB-281		7/25	0.00	305.00	0.00	12.00	36.60	0.00	305.00
18	9018	IV SET-ECO		500		HCR23025		11/26	0.00	6.50	0.00	12.00	390.00	0.00	3250.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Stock No. of Boxes Received	TOTAL
IGST 5.00%	1288.00	0.00	0.00	64.40	0.00	64.40	23583.00
IGST 12.00%	22295.00	0.00	0.00	2675.40	0.00	2675.40	
IGST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00	
IGST 28 %	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	23583.00	0.00	0.00	2739.80	0.00	2739.80	

Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature
DIS AMT. 0.00
PAYBLE 2739.80
PAYBLE 0.00
CR/DR NOTE 0.00
M No. 9584802753

Rs. Thirty Five Thousand Sixty Nine Only

MSG:

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