

Extra Copy

GST INVOICE

BILL TO :
 DCDC DISTRICT HOSPITAL SANT KABIR NAGAR
 DISTRICT HOSPITAL MEHDAWAL ROAD,
 KALILABAD, UTTAR PRADESH-272175 State : 09

PHONE. : 8447444344

SHIPPED TO
 Name :- DISTRICT HOSPITAL
 Address:- DIALYSIS UNIT, DISTRICT HOSPITAL
 MEHDAWAL ROAD, KHALILABAD
 SANT KABIR NAGAR, UTTAR PRADESH-272175
 NUMBER :- 9554310933

ANIL PHARMA
 C-58, RAJAN BABU ROAD,
 ADARSH NAGAR, DELHI - 110033
 Phone : 011-41557131, 9212300328
 D.L.No. : 20B-137393 \ 21B-137394
 GSTIN : 07AAPPG6291A1ZR
 E-Mail : anilpharma1997@gmail.com

Invoice No : A001675
 Invoice Date : 12-01-2024
 P.O. No. : 24812
 P.O. Date : 05-01-2024
 Bill No. :
 L.R. Date : 12-01-2024
 Cases : 3
 Due Date : 11-05-2024

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
1	30059090	CATHERIZATION ON KIT		50		ONK24		12/26	0.00	28.00	0.00	12.00	168.00	0.00	1400.00
2	4015	EXAM GLOVES (M)		60		HCR23016		6/26	0.00	230.00	0.00	12.00	1656.00	0.00	13800.00
3	9018	IV SET-ECO		500		2307088		6/26	0.00	6.50	0.00	12.00	390.00	0.00	3250.00
4	3005	MICROPORE 2"		120				7/26	0.00	46.60	0.00	12.00	671.04	0.00	5592.00
5	30049087	POVINANZ M/B POWDER		50		N0130500			0.00	15.00	0.00	12.00	90.00	0.00	750.00
6	9018	SHARP CONTAINER PLASTIC 3LTR		2		0.00			0.00	150.00	0.00	12.00	36.00	0.00	300.00
7	996812	Add FREIGHT CHARGES							0.00	1890.00	0.00	18.00	340.20	0.00	1890.00

Stock/No. of Boxes Received 3 Box
 Subject to Physical Check
 Name/Employee Code D.C.O. 2137
 Centre Name S.K.V.N.
 Date/Time 28/01/24
 Signature M. No. 9554310933

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Amount
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	7	0.00
IGST 12.00%	25092.00	0.00	0.00	3011.04	3011.04	782	3351.24
IGST 18.00%	1890.00	0.00	0.00	340.20	340.20		0.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00		-0.24
TOTAL	26982.00	0.00	0.00	3351.24	3351.24		0.00

Rs. Thirty Thousand Three Hundred Thirty 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.

FOR ANIL PHARMA

Authorised Signatory

Grand Total

30333.00

TOTAL	Amount
DIS AMT.	0.00
IGST PAYABLE	3351.24
PAYABLE	0.00
Round off	-0.24
CR/DR NOTE	0.00
TOTAL	26982.00