



ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
DL No : 20B-137393 \ 21B-137394
GSTIN : 07AAPP6291A1ZR
E-Mail : anilpharma1997@gmail.com

GST INVOICE

Invoice No	A000216	L.R.No.	15-05-2023
Invoice Date	15-05-2023	L.R.Date	15-05-2023
P.O. No	22633-4	Cases	0
P.O. Date	05-05-2023	Due Date	12-09-2023
Transport :-		E-WAY BILL NO :-	
VEHICLE NO :-		STATION :- 24-GUJARAT	

Original for Buyer

BILL TO :
DCDC ESIC AHMEDABAD
ESIC MODEL HOSPITAL
CHANDRA SHEKHAR AZAD ROAD, State 24
BAPU NAGAR AHMEDABAD
PHONE : 6352516728

SHIPPED TO
Name :- ESIC HOSPITAL
ADDRESS :- DIALYSIS UNIT, ESIC MODEL HOSPITAL
CHANDRA SHEKHAR AZAD ROAD, BAPU NAGAR
AHMEDABAD, GUJARAT-380024
NUMBER :- 6352516728

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	3004	INJ ADRENALINE 1ML 1*50(R)	1*50	1		AD-195	2/23	5/24	0.00	245.00	0.00	12.00	29.40	0.00	245.00
2	3004	INJ ATROPINE SULPHATE 1ML*100	1*100	1		AT-168	2/23	10/24	0.00	288.00	0.00	5.00	14.40	0.00	288.00
3	3004	INJ BUSCOGAST 1*50	1*50	100		AG-541A	2/23	10/24	0.00	9.90	0.00	12.00	118.80	0.00	990.00
4	30049039	INJ CALCIUM GLOCONATE 10ML 1*5	1*50	1		CG-381	9/24	9/24	0.00	290.00	0.00	12.00	34.80	0.00	290.00
5	3004	INJ CARNIXOL	50	50		KAN23031A	3/25	3/25	0.00	24.50	0.00	12.00	147.00	0.00	1225.00
6	3004	INJ DOPHINE 200MG 1*5 (DOMIN)	50	50		AD257-B	9/24	10/24	0.00	16.00	0.00	5.00	40.00	0.00	800.00
7	3004	INJ FRUSAMIDE 1*50 (R) / LASI	1*50	2		FM-122	2/23	9/24	0.00	112.24	0.00	12.00	39.60	0.00	330.00
8	3004	INJ MEDARONE 3ML (CORDRONE)	50	50		AC2596A	2/23	11/24	0.00	50.00	0.00	12.00	84.00	0.00	2500.00
9	30043913	INJ MEPEDEX (DEXA)	100	100		FN-361	12/24	12/24	0.00	7.00	0.00	12.00	84.00	0.00	700.00
10	30042019	INJ NORAD 2ML	50	50		KAN23004B	1/25	10/24	0.00	27.90	0.00	12.00	167.40	0.00	1395.00
11	30049099	INJ POTASSIUM CHLORIDE 10ML 1*	1*50	1		PC-203	10/24	10/24	0.00	300.00	0.00	12.00	36.00	0.00	300.00
12	3004	INJ RENOPHYLINE 10ML 1*50(R)	1*50	1		PP-116	9/24	9/24	0.00	285.00	0.00	12.00	34.20	0.00	285.00
13	3004	INJ S.B.C 10ML 1*50 (R)	1*50	1		SB-279	10/24	10/24	0.00	305.00	0.00	12.00	36.60	0.00	305.00
14	30049088	INJ ZINOCANINE (LOX 2%)	50	50		NZLU-001	1/25	1/25	0.00	38.50	0.00	12.00	231.00	0.00	1925.00
15	9019	NASAL PRONG	2	2		0.00			0.00	32.00	0.00	12.00	7.68	0.00	64.00
16	9019	OXYGEN MASK (ADULT)	2	2		0.00			0.00	40.00	0.00	12.00	9.60	0.00	80.00
17	9018	RMS 10ML SYRINGE	1*50	10		G2303207-13	2/28	2/28	0.00	225.50	0.00	12.00	270.60	0.00	2255.00
18	30049076	TAB ARKAMIN (CLODICT)	500	10		Z5A10122	12/24	12/24	0.00	38.00	0.00	12.00	2280.00	0.00	19000.00
CLASS			TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST						DIS AMT	Value	Amount
IGST 5.00%			1088.00	0.00	0.00	54.40	54.40						0.00		0.00
IGST 12.00%			31889.00	0.00	0.00	3826.68	3826.68						3881.0		3881.0
IGST 18.00%			0.00	0.00	0.00	0.00	0.00						0.0		0.0
IGST 28 %			0.00	0.00	0.00	0.00	0.00						0.0		0.0
TOTAL			32977.00	0.00	0.00	3881.08	3881.08								

Rs. Fifty One Thousand Eight Hundred Seventy Only

MSG

DDCHSPL CENTRE-ESIC HOSPITAL AHMEDABAD

FOR ANIL PHARMA

Authorised Signatory

Continue Page..

MATERIAL RECEIVED

DATE: 22/5/23

TIME: 12:30

RECEIVED BY: [Signature]

Terms & Conditions

Goods once sold will not be taken back.

All disputes subject to Jurisdiction of Ahmedabad.

Bills not paid due date will attract 24% interest.



ANIL PHARMA

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ADARSH NAGAR, DELHI - 110033
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ESIC MODEL HOSPITAL
CHANDRA SHEKHAR AZAD ROAD, State : 24
BAPU NAGAR AHMEDABAD
PHONE : 6352516728

SHIPPED TO
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CHANDRA SHEKHAR AZAD ROAD, BAPU NAGAR
AHMEDABAD, GUJRAT-380024
NUMBER :- 6352516728

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
19	30049074	TAB METOL-25 (BETALOC 25)		500		SPA221645		7/24	0.00	25.50	0.00	12.00	1530.00	0.00	0.00	12750.00
20	996812	Add FREIGHT CHARGES							0.00	620.00	0.00	18.00	111.60	0.00	0.00	620.00
													TOTAL		32977.00	

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	TOTAL
IGST 5.00%	1088.00	0.00	0.00	54.40	0.00	20		DIS AMT. 0.00
IGST 12.00%	44639.00	0.00	0.00	5356.68	0.00	1472		IGST PAYBLE 5522.6
IGST 18.00%	620.00	0.00	0.00	111.60	0.00			PAYBLE 0.0
IGST 28 %	0.00	0.00	0.00	0.00	0.00			Round off 0.3
TOTAL	46347.00	0.00	0.00	5522.68	0.00			CR/DR NOTE 0.0

Rs. Fifty One Thousand Eight Hundred Seventy Only

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

DCDC HSPL CENTRE-ESIC HOSPITAL AHMEDABAD
MATERIAL RECEIVED
DATE: 22/5/23
TIME: RECEIVED BY: [Signature]

FOR ANIL PHARMA

Authorized Signatory

Grand Total

51870.00

Terms & Conditions

Goods once sold will not be taken back or exchanged.
Bills not paid due date will attract 24% interest.