

Duplicate for Transporter

GST INVOICE

BILL TO :

DCDC CIVIL HOSPITAL JAGADHARI
CIVIL HOSPITAL, NEAR GOVT. REST HOUSE
JAGADHARI State : 06

PHONE : 8506000536

SHIPPED TO

Name :-
ADDRESS :-

NUMBER :-

Invoice No	A000297	L.R. No.	01-06-2023
Invoice Date	01-06-2023	L.R. Date	01-06-2023
P.O. No.	2855-2	Cases	0
P.O. Date	4/5/23	Due Date	01-06-2023

Transport :- BY HAND

E-WAY BILL NO :-

VEHICLE NO. 18-43

STATION :- 06-HARYANA



ANIL PHARMA

RAJAN BABU ROAD,
RISHI NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
Fax : 20B-137393 \ 21B-137394
E-Mail : ANILPHARMA@GMAIL.COM
Website : WWW.ANILPHARMA.COM

HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
30018	IV SET-ECO		700		IVG010123		12/27	0.00	6.50	0.00	12.00	546.00	0.00	4550.00

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

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL	DIS AMT.
ST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST 12.00%	4550.00	0.00	0.00	546.00	546.00	546.00	546.00
ST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST 28 %	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	4550.00	0.00	0.00	546.00	546.00	4550.00	0.00

Total Items :- 1
Total Qty :- 700

FOR ANIL PHARMA

Authorised Signatory

BANK DETAILS AS :-

Five Thousand Ninety Six Only
Bank Name : UJJIVAN SMALL FINANCE BANK
Branch Name : ADARSH NAGAR
Account No. : 2207120040000335
C Code : UJVN0002207

Grand Total 5096.00

Terms & Conditions

Goods once sold will not be taken back or exchanged.
Not paid due date will attract 24% interest.
Disputes subject to Jurisdiction only.