



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

GST INVOICE

Invoice No	A001382	Bill No.	
Invoice Date	25-11-2023	L.R. Date	25-11-2023
P.O. No.	24159	Cases	1
P.O. Date	06-11-2023	Due Date	24-03-2024
Transport :-		E-WAY BILL NO :-	
		VEHICLE NO. :-	
		STATION :-	06-HARYANA

Original for Buyer
BILL TO :
 DDCD GOVT. POLYCLINIC KURUKSHETRA
 GOVERNMENT POLYCLINIC UMARI ROAD
 SECTOR- 4, KURUKSHETRA State : 06
 HARYANA-136118
 PHONE. : 7015874488

SHIPPED TO
 Name :- GOVT. POLYCLINIC
 Address:- DIALYSIS UNIT, GOVT. POLYCLINIC
 UMARI ROAD, SECTOR-04, KURUKSHETRA
 HARYANA - 136118
 NUMBER :- 8860258930

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		500		0.00			0.00	8.00	0.00	12.00	480.00	0.00	480.00
2	9018	GREEN LIFE 5ML SYR		3		220123	2/23	12/27	0.00	195.00	0.00	12.00	70.20	0.00	70.20
3	996812	Add FREIGHT CHARGES							0.00	925.00	0.00	18.00	166.50	0.00	166.50
TOTAL													716.70	0.00	716.70

DIS AMT.
 IGST PAYBLE
 PAYBLE
 Round off
 CR/DR NOTE

FOR ANIL PHARMA
 Stock/No. of Boxes Received **Yes**
 Subject to Physical Check **Yes**
 Name/Employee Code **926695**
 Centre Name **Kurukshetra**
 Date/Time **29/11/23**
 M. No. **91406607532**
 Authorised Signatory

Grand Total
6227.00

OUR BANK DETAILS :-
 Bank Name : UJIVAN 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.