



ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
D.L.No. : 208-137393 \ 21B-137394
GSTIN : 07AAPP6291A1ZR
E-Mail : anilpharma1997@gmail.com

GST INVOICE

| | | | |
|------------------|---------------------|-----------|------------|
| Invoice No | A001563 | Bill No. | |
| Invoice Date | 20-12-2023 | L.R. Date | 20-12-2023 |
| P.O. No. | 24415 | Cases | 6 |
| P.O. Date | 07-12-2023 | Due Date | 18-04-2024 |
| Transport :- | ARYAN GOODS CARRIER | | |
| E-WAY BILL NO :- | | | |
| VEHICLE NO. :- | | | |
| STATION :- | 06-HARYANA | | |

Duplicate for Transporter

BILL TO :
DCCD CIVIL HOSPITAL REWARI
CIVIL HOSPITAL , KAYSTHWARA MOHALLA
REWARI State : 06
HARYANA
PHONE : 8930388314

SHIPPED TO
Name :- CIVIL HOSPITAL
Address:- DIALYSIS UNIT, CIVIL HOSPITAL
KAYASTHWARA MOHALLA , REWARI
HARYANA - 123401
NUMBER :- 9817435163

| S.N | HSN | Product Name | Pack | Qty | Free | Batch | Mfg | Exp | M.R.P | Rate | Dis | IGST | Value | Value | Amount |
|--------------|-----------------|---------------------------------|-----------------|----------------|-------------------|----------|------|-------|-------|--------|------|-------|--------------|--------------|---------------|
| 1 | 90183990 | BT SET (NV) | | 50 | | HCR81001 | | 11/25 | 0.00 | 19.00 | 0.00 | 12.00 | 114.00 | 0.00 | 950.00 |
| 2 | 3005 | DYNAPLAST | | 6 | | EAB29 | 3/21 | 1/24 | 0.00 | 149.50 | 0.00 | 12.00 | 107.64 | 0.00 | 897.00 |
| 3 | 4015 | EXAM GLOVES (M) | | 60 | | | | | 0.00 | 230.00 | 0.00 | 12.00 | 1656.00 | 0.00 | 13800.00 |
| 4 | 30059040 | FITSULA OFF KIT | | 500 | | | | | 0.00 | 8.00 | 0.00 | 12.00 | 480.00 | 0.00 | 4000.00 |
| 5 | 30059040 | FITSULA ON-KIT | | 500 | | | | | 0.00 | 8.00 | 0.00 | 12.00 | 480.00 | 0.00 | 4000.00 |
| 6 | 9018 | HYPODERMIC STERILE SYRINGE 5ML | 1*100 | 4 | | 51510023 | | 11/27 | 0.00 | 195.00 | 0.00 | 12.00 | 93.60 | 0.00 | 780.00 |
| 7 | 9018 | HYPODERMIC STERILE SYRINGE 10M | 1*50 | 10 | | 51310023 | | 9/28 | 0.00 | 175.00 | 0.00 | 12.00 | 210.00 | 0.00 | 1750.00 |
| 8 | 3004 | INJ BIOCETAMOL (PYREMOL) 2ML 1 | | 100 | | 136011 | | 6/25 | 0.00 | 5.10 | 0.00 | 12.00 | 61.20 | 0.00 | 510.00 |
| 9 | 30049039 | INJ CALCIUM GLOCONATE 10ML 1*5 | 1*50 | 1 | | CG-382 | | 1/25 | 0.00 | 290.00 | 0.00 | 12.00 | 34.80 | 0.00 | 290.00 |
| 10 | 3004 | INJ CARNIXOL | | 400 | | MN23196A | | 7/25 | 0.00 | 19.65 | 0.00 | 12.00 | 943.20 | 0.00 | 7860.00 |
| 11 | 3004 | INJ HYDROCORTISONE 100MG (EFFCO | | 100 | | 23GH10K | | 7/25 | 0.00 | 23.50 | 0.00 | 5.00 | 117.50 | 0.00 | 2350.00 |
| 12 | 30049069 | INJ ONDION (EMSET) | | 50 | | MN23265A | | 9/25 | 0.00 | 4.80 | 0.00 | 12.00 | 28.80 | 0.00 | 240.00 |
| 13 | 3004 | INJ PANTAPROZOLE 40MG | | 100 | | MN23248B | | 9/25 | 0.00 | 14.30 | 0.00 | 12.00 | 171.60 | 0.00 | 1430.00 |
| 14 | 30049039 | INJ REVIL | | 50 | | W532 | | 8/25 | 0.00 | 3.30 | 0.00 | 12.00 | 19.80 | 0.00 | 165.00 |
| 15 | 9018 | IV SET-ECO | | 500 | | HCR23016 | | 6/26 | 0.00 | 6.50 | 0.00 | 12.00 | 390.00 | 0.00 | 3250.00 |
| 16 | 3005 | MICROPOR 3" | | 100 | | 2310151 | | 9/26 | 0.00 | 75.00 | 0.00 | 12.00 | 900.00 | 0.00 | 7500.00 |
| 17 | 30049087 | POVINANZ M/B POWDER | | 50 | | N0130500 | | 7/26 | 0.00 | 15.00 | 0.00 | 12.00 | 90.00 | 0.00 | 750.00 |
| 18 | 9018 | SHARP CONTAINER PLASTIC 3LTR | | 5 | | | | | 0.00 | 150.00 | 0.00 | 12.00 | 90.00 | 0.00 | 750.00 |
| CLASS | TOTAL | SCHEME | DISCOUNT | IGST | TOTAL IGST | | | | | | | | Value | Value | Amount |
| IGST 5.00% | 2350.00 | 0.00 | 0.00 | 117.50 | 117.50 | | | | | | | | | | 0.00 |
| IGST 12.00% | 48922.00 | 0.00 | 0.00 | 5870.64 | 5870.64 | | | | | | | | | | 5988.14 |
| 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 | 51272.00 | 0.00 | 0.00 | 5988.14 | 5988.14 | | | | | | | | 90.00 | 0.00 | 750.00 |

Rs. Sixty One Thousand One Hundred Three Only

Terms & Conditions

Goods once sold will not be taken back or exchanged.
All disputes subject to DELHI Jurisdiction only.
Bills not paid due date will attract 24% Interest.

Stock No. of Boxes Received

FOR ANIL PHARMA
Subject to Physical Check

Name/Employee Code
Centre Name
Date/Time
Signature

Continue Page... 2



ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
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| E-WAY BILL NO :- | VEHICLE NO. :- | | |
| STATION :- | 06-HARYANA | | |

BILL TO :
DDCC CIVIL HOSPITAL REWARI
CIVIL HOSPITAL, KAYSTHWARA MOHALLA
REWARI State : 06
HARYANA
PHONE : 8930388314

SHIPPED TO
Name :- CIVIL HOSPITAL
Address:- DIALYSIS UNIT, CIVIL HOSPITAL,
KAYASTHWARA MOHALLA, REWARI
HARYANA - 123401
NUMBER :- 9817435163

| S/N | HSN | Product Name | Pack | Qty | Free | Batch | Mfg. | Exp. | M.R.P | Rate | Dis | IGST | Value | Value | Amount | | | | | | | | | | | | |
|--|----------|-------------------------------|-------|-----|------|----------|-------|-------|-------|--------|------|-------|--------|-------|----------|--|--|--|--|--|--|--|--|--|--|--|--|
| 19 | 9018 | SURGICAL BLADE 15NO | 1*100 | 1 | | 9387 | | 9/28 | 0.00 | 230.00 | 0.00 | 12.00 | 27.60 | 0.00 | 51272.00 | | | | | | | | | | | | |
| 20 | 30049069 | TAB BIOCETAMOL 500MG | | 10 | | CPTV1513 | 12/22 | 10/25 | 0.00 | 9.50 | 0.00 | 12.00 | 11.40 | 0.00 | 230.00 | | | | | | | | | | | | |
| 21 | 30049039 | TAB PEPTILCER40 MG (PANTOSEC) | | 25 | | SPA23130 | | 4/25 | 0.00 | 34.25 | 0.00 | 12.00 | 102.75 | 0.00 | 95.00 | | | | | | | | | | | | |
| 22 | 9018 | VACCUTAINER EDTA | | 100 | | 0.00 | | | 0.00 | 6.00 | 0.00 | 12.00 | 72.00 | 0.00 | 856.25 | | | | | | | | | | | | |
| 23 | 9018 | VACCUTAINER PLAIN | | 300 | | 0.00 | | | 0.00 | 5.50 | 0.00 | 12.00 | 198.00 | 0.00 | 600.00 | | | | | | | | | | | | |
| <p>Stock/No. of Boxes Received 6 Subject to Physical Check Name/Employee Code Nela (DCC/17) Centre Name Civil Hospital Date/Time 20/12/23 Signature Nela M No 9817435163</p> | | | | | | | | | | | | | TOTAL | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | |
|---|----------|------|------|---------|------|---------|--|--|--|--|--|--|--|--|--|
| Rs. Sixty One Thousand One Hundred Three Only | 54703.25 | 0.00 | 0.00 | 6399.89 | 0.00 | 6399.89 | | | | | | | | | |
|---|----------|------|------|---------|------|---------|--|--|--|--|--|--|--|--|--|

| | |
|-------------------------------|------------------------|
| OUR BANK DETAILS AS :- | FOR ANIL PHARMA |
|-------------------------------|------------------------|

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 DELHI Jurisdiction only.

Grand Total

61103.00

Authorised Signatory