



ANIL PHARMA

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

GST INVOICE

Duplicate for Transporter

Invoice No	A000898	Bill No.	
Invoice Date	14-09-2023	L.R. Date	14-09-2023
P.O. No.		Cases	0
P.O. Date	01-08-2002	Due Date	12-01-2024
Transport :-			
E-WAY BILL NO :-			
VEHICLE NO. :-			
STATION :- 06-HARYANA			

BILL TO :
DCDC CIVIL HOSPITAL BHIWANI
CIVIL HOSPITAL NEAR PMO HOSPITAL
GHANTA GHAR CHOWK BHIWANI State 06
HARYANA
PHONE : 9729035169

SHIPPED TO
Name :- 06-09-2023
Address:- DIALYSIS UNIT, CIVIL HOSPITAL
GHANTA GHAR CHOEK, BHIWANI
HARYANA - 127021
NUMBER :- 8506000716

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	90189029	BLUE PUNCTURE 10LTR		10					0.00	240.00	0.00	12.00	288.00	0.00	2400.00
2	4015	EXAM GLOVES (M)		60					0.00	230.00	0.00	12.00	1656.00	0.00	13800.00
3	63079090	FACE MASK 3 PLY EARLOOP BLUE		300		0.00			0.00	1.50	0.00	5.00	22.50	0.00	450.00
4	30059040	FITSULA OFF KIT		900		0.00			0.00	8.00	0.00	12.00	864.00	0.00	7200.00
5	30059040	FITSULA ON-KIT		1200		0.00			0.00	8.00	0.00	12.00	1152.00	0.00	9600.00
6	9018	HYPODERMIC STERILE SYRINGE 5ML	1*100	7		35607023		6/28	0.00	195.00	0.00	12.00	163.80	0.00	1365.00
7	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	16		23705023		4/28	0.00	175.00	0.00	12.00	336.00	0.00	2800.00
8	30049069	INJ ONDION (EMSET)		50		OS-01		5/25	0.00	4.80	0.00	12.00	28.80	0.00	240.00
9	3004	INJ PANTAPROZOLE 40MG		50		23GG35A		6/25	0.00	14.30	0.00	12.00	85.80	0.00	715.00
10	9018	IV SET-ECO		500		23060260C		5/26	0.00	6.50	0.00	12.00	390.00	0.00	3250.00
11	3808	KLACII LIQUID HAND SANITIZER 5		2		HS032L		6/26	0.00	580.00	0.00	18.00	208.80	0.00	1160.00
12	3005	MICROPORE 3"		48		2307088		6/26	0.00	75.00	0.00	12.00	432.00	0.00	3600.00
13	9018	SHARP CONTAINER PLASTIC 3LTR		10		0.00			0.00	150.00	0.00	12.00	180.00	0.00	1500.00
TOTAL													48080.00		

Rs. Fifty Three Thousand Eight Hundred Eighty Eight Only

OUR BANK DETAILS AS :-

Bank Name : UJIVAN SMALL FINANCE BANK
Branch Name : ADARSH NAGAR
Account No. : 2207120040000335
IFSC Code : UJVN0002207

Stock/No. of Boxes Received

Subject to Physical Check
Name/Employee Code :
Centre Name :
Date/Time :
M. No. :

FOR ANIL PHARMA

Authorized Signatory

Grand Total

53888.00

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.