



DELHIVERY		SPOTON Engineered for Accuracy	Created Date: 14/09/23 Pickup Date: 14/09/23	251049966			251049966
1. FROM: Drop-Off <input type="checkbox"/>				4. TO: Self Collect <input type="checkbox"/>			
Shipper's Name: GANPATIEXPRES B2BC				Recipient's Name: DCDC CURESTA GLOBAL HOSPITAL IRBA, DCDC CURESTA GLOBAL HOSPITAL IRBA			
Shipper's Phone Number:				Recipient's Phone Number:			
Street Name: PLOT NO. 62 RAJASHTHANI UDYOG NAGAR DELHI-110033				Street Name: DIALYSIS UNIT, CURESTA GLOBAL HOSPITAL MADARSA MOHALLA IRBA			
City: Delhi	State: Delhi	Postal Code: 110033		City: Ormanjhi	State: Jharkhand	Postal Code: 835219	
GST NO.: 07AAPP6291A1ZR				GST NO.:			
2. SHIPMENT INFORMATION				Client/Store/Address Code:			
SHIPPER'S REFERENCE NO. (25 characters): ANIL PHARMA				5. MOT:			
INVOICE NO.: A000892		EWTN :		AIR <input type="checkbox"/>		6. SPECIAL HANDLING:	
TOTAL INVOICE VALUE: 22322		Master Id: 23760010061950		GROUND <input type="checkbox"/>		FRAGILE <input type="checkbox"/> HEAVY (>30 KG) <input type="checkbox"/> DG. <input type="checkbox"/>	
# BOXES x DIMENSION (LxWxH) cm *	COMMODITY DESCRIPTION	TOTAL WEIGHT *		POD on Invoice <input type="checkbox"/>		VAL CARGO. <input type="checkbox"/>	
	MEDICINE	35 kgs		7. INSURANCE:		8. PAYMENT:	
1: 62 x 34 x 42				FOV. <input type="checkbox"/> MARINE. <input type="checkbox"/>		TRANSPORT: SHIPPER <input type="checkbox"/> RECIPIENT <input type="checkbox"/>	
1: 36 x 33 x 35				VALUE:		DUTIES & TAXES: SHIPPER <input type="checkbox"/> RECIPIENT <input type="checkbox"/>	
1: 31 x 23 x 31						CASH ON DELIVERY COD AMOUNT: ₹ 0	
						CHEQUE ON DELIVERY <input type="checkbox"/>	
						CHEQUE BENEFICIARY'S NAME:	
*As declared by the client; billed weight may vary.				9. REQUIRED SIGNATURE - DESTINATION:			
TOTAL NUMBER OF BOXES: 3				RECIPIENT'S SIGNATURE AND STAMP:			
DOCUMENT RECEIVED: INVOICE <input type="checkbox"/> () TAX FORMS <input type="checkbox"/> () OTHERS <input type="checkbox"/> ().....				DATE..... TIME.....			
No. Of DOCUMENTS:				Stock/No. of Boxes Received <u>3</u>			
3. REQUIRED SIGNATURE - ORIGIN:				Subject to Physical Check			
DELHIVERY EMP ID:.....		SHIPPER'S SIGN:.....		Name/Employee Code <u>ROHIT CHOWBEY</u>			
DELHIVERY LIMITED				SPOTON LOGISTICS PVT LTD (Formerly Starrek Logistics Pvt Ltd)			
REGISTERED OFFICE: N24-N34, S24-S34, Air Cargo Logistics Centre-II, Opposite Gate 6 Cargo Terminal, IGI Airport, New Delhi, India (110037)				REGISTERED OFFICE: Thanavan, 23/24, Infantry Road, Bengaluru, India (560001)			
TRANSPORTER ID: 06AAPCS9575E1ZR				TRANSPORTER ID: 29AAQCS5815QLZI			
CEN No: L63090DL2011PLC221234				CIN No: U63090GJ2011PTC108834			
PAN: AAPCS9575E				PAN: AAQC55845Q			
For terms and conditions visit www.delhivery.com				LM POD			

DELHIVERY		SPOTON Engineered for Accuracy	Created Date: 14/09/23 Pickup Date: 14/09/23	251049966			251049966
1. FROM: Drop-Off <input type="checkbox"/>				4. TO: Self Collect <input type="checkbox"/>			
Shipper's Name: GANPATIEXPRES B2BC				Recipient's Name: DCDC CURESTA GLOBAL HOSPITAL IRBA, DCDC CURESTA GLOBAL HOSPITAL IRBA			
Shipper's Phone Number:				Recipient's Phone Number:			
Street Name: PLOT NO. 62 RAJASHTHANI UDYOG NAGAR DELHI-110033				Street Name: DIALYSIS UNIT, CURESTA GLOBAL HOSPITAL MADARSA MOHALLA IRBA			
City: Delhi	State: Delhi	Postal Code: 110033		City: Ormanjhi	State: Jharkhand	Postal Code: 835219	
GST NO.: 07AAPP6291A1ZR				GST NO.:			
2. SHIPMENT INFORMATION				Client/Store/Address Code:			
SHIPPER'S REFERENCE NO. (25 characters): ANIL PHARMA				5. MOT:			
INVOICE NO.: A000892		EWTN :		AIR <input type="checkbox"/>		6. SPECIAL HANDLING:	
TOTAL INVOICE VALUE: 22322		Master Id: 23760010061950		GROUND <input type="checkbox"/>		FRAGILE <input type="checkbox"/> HEAVY (>30 KG) <input type="checkbox"/> DG. <input type="checkbox"/>	
# BOXES x DIMENSION (LxWxH) cm *	COMMODITY DESCRIPTION	TOTAL WEIGHT *		POD on Invoice <input type="checkbox"/>		VAL CARGO. <input type="checkbox"/>	
	MEDICINE	35 kgs		7. INSURANCE:		8. PAYMENT:	
1: 62 x 34 x 42				FOV. <input type="checkbox"/> MARINE. <input type="checkbox"/>		TRANSPORT: SHIPPER <input type="checkbox"/> RECIPIENT <input type="checkbox"/>	
1: 36 x 33 x 35				VALUE:		DUTIES & TAXES: SHIPPER <input type="checkbox"/> RECIPIENT <input type="checkbox"/>	
1: 31 x 23 x 31						CASH ON DELIVERY COD AMOUNT: ₹ 0	
						CHEQUE ON DELIVERY <input type="checkbox"/>	
						CHEQUE BENEFICIARY'S NAME:	
*As declared by the client; billed weight may vary.				9. REQUIRED SIGNATURE - DESTINATION:			
TOTAL NUMBER OF BOXES: 3				RECIPIENT'S SIGNATURE AND STAMP:			
DOCUMENT RECEIVED: INVOICE <input type="checkbox"/> () TAX FORMS <input type="checkbox"/> () OTHERS <input type="checkbox"/> ().....				DATE..... TIME.....			
No. Of DOCUMENTS:							
3. REQUIRED SIGNATURE - ORIGIN:							
DELHIVERY EMP ID:.....		SHIPPER'S SIGN:.....					



PHARMA

RAJAN BABU ROAD,
RSH NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
No. : 20B-137393 \ 21B-137394
STIN : 07AAPP6291A1ZR
Mail : anilpharma1997@gmail.com

Duplicate for Transporter

GST INVOICE

Invoice No	A000892	Bill No.	
Invoice Date	13-09-2023	L.R. Date	13-09-2023
P.O. No.	23581	Cases	0
P.O. Date	31-08-2023	Due Date	11-01-2024

BILL TO :
DCDC CURESTA GLOBAL HOSPITAL IRBA
DIALYSIS UNIT, CURESTA GLOBAL HOSPITAL
MADARSA MOHALLA , IRBA , JHARKHAND - 835219 S

PHONE : 9304889041

Transport :-
E-WAY BILL NO :-
VEHICLE NO. :-
STATION :- 20-JHARKHAND

SHIPPED TO
Name :- CURESTA HOSPITAL
Address:- DIALYSIS UNIT, CURESTA GLOBAL HOSPITAL
MADARSA MOHALLA , IRBA
JHARKHAND - 835219
NUMBER :- 9304889041

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
19	996812	Add FREIGHT CHARGES							0.00	1690.00	0.00	18.00	304.20	0.00	0.00	18108.00 1690.00
													TOTAL			

Stock/No. of Boxes Received 3
Subject to Physical Check
Name/Employee Code ROHIT CHOUBEY
Centre Name CURESTA GLOBAL ACMS
Date/Time 19/09/2023 11:50 AM
Signature [Signature] M. No. 6299919846

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	240.00	0.00	0.00	12.00	0.00	12.00
IGST 12.00%	16814.00	0.00	0.00	2017.68	0.00	2017.68
IGST 18.00%	2744.00	0.00	0.00	493.92	0.00	493.92
IGST 28 %	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	19798.00	0.00	0.00	2523.60	0.00	2523.60

Total Items :- 19
Total Qty :- 681

TOTAL	19798.00
DIS AMT.	0.00
IGST PAYBLE	2523.60
PAYBLE	0.00
Round off	0.40
CR/DR NOTE	0.00
TOTAL	0.00

Rs. Twenty Two Thousand Three Hundred Twenty Two Only

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

FOR ANIL PHARMA

Authorized Signatory

Grand Total

22322.00

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



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

Invoice No	A000892	Bill No.	
Invoice Date	13-09-2023	L.R. Date	13-09-2023
P.O. No.	23581	Cases	0
P.O. Date	31-08-2023	Due Date	11-01-2024

Transport :-
E-WAY BILL NO :-
VEHICLE NO. :-
STATION :- 20-JHARKHAND

Duplicate for Transporter

BILL TO :
DCDC CURESTA GLOBAL HOSPITAL IRBA
DIALYSIS UNIT, CURESTA GLOBAL HOSPITAL
MADARSA MOHALLA , IRBA , JHARKHAND - 835219 S
PHONE. : 9304889041

SHIPPED TO
Name :- CURESTA HOSPITAL
Address:- DIALYSIS UNIT, CURESTA GLOBAL HOSPITAL
MADARSA MOHALLA , IRBA
JHARKHAND - 835219
NUMBER :- 9304889041

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		HCRBT001		11/25	0.00	19.00	0.00	12.00	114.00	0.00	950.00
2	6210	BUFFANT CAP		100		0.00			0.00	0.90	0.00	5.00	4.50	0.00	90.00
3	3005	DYNAPLAST		2		0.00			0.00	149.50	0.00	12.00	35.88	0.00	299.00
4	4015	EXAM GLOVES (M)		5					0.00	230.00	0.00	12.00	138.00	0.00	1150.00
5	63079090	FACE MASK 3 PLY EARLOOP BLUE		100		0.00			0.00	1.50	0.00	5.00	7.50	0.00	150.00
6	3005	G PLAST		5		2307DF0		6/28	0.00	75.00	0.00	12.00	45.00	0.00	375.00
7	3004	HOSPIDEX SOLU (CIDAX)		2		N0130112		3/25	0.00	420.00	0.00	12.00	100.80	0.00	840.00
8	9018	HYPODERMIC STERILE SYRINGE 5ML	1*100	1		35607023		6/28	0.00	195.00	0.00	12.00	23.40	0.00	195.00
9	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	3		23705023		4/28	0.00	175.00	0.00	12.00	63.00	0.00	525.00
10	30049099	INJ HOSTRANIL 25000 IU		40		HIHE23010A		5/25	0.00	130.00	0.00	12.00	624.00	0.00	5200.00
11	9018	IV SET-ECO		100		23060260C		5/26	0.00	6.50	0.00	12.00	78.00	0.00	650.00
2	3808	KLACII LIQUID HAND SANITIZER 5		1		HS032L			0.00	580.00	0.00	18.00	104.40	0.00	580.00
3	3005	MICROPORE 3"		16		2307088		6/26	0.00	75.00	0.00	12.00	144.00	0.00	1200.00
4	9018	NEEDLE CUTTER 3LTR		2					0.00	2300.00	0.00	12.00	552.00	0.00	4600.00
5	30049087	POVINANZ M/B POWDER		2		N0130079		3/26	0.00	15.00	0.00	12.00	3.60	0.00	30.00
6	40151900	ROYAL GLOVES (RUBBER GLOVES)		2		0.00			0.00	42.00	0.00	18.00	15.12	0.00	84.00
7	3901	SHOE COVER		200		0.00			0.00	1.95	0.00	18.00	70.20	0.00	390.00
8	4015	SURGICAREGLOVES 7.5		50		0.00			0.00	16.00	0.00	12.00	96.00	0.00	800.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	240.00	0.00	0.00	12.00	0.00	12.00
IGST 12.00%	16814.00	0.00	0.00	2017.68	0.00	2017.68
IGST 18.00%	1054.00	0.00	0.00	189.72	0.00	189.72
IGST 28 %	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	18108.00	0.00	0.00	2219.40	0.00	2219.40

Rs. Twenty Two Thousand Three Hundred Twenty Two Only

MSG:

Terms & Conditions

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

Stock/No. of Boxes Received 3
Subject to Physical Check
Name/Employee Code ROHIT CHOUBEY
Centre Name CURESTA GLOBAL ACMS
Date/Time 19/09/2023 11:50 AM
Signature [Signature] M. No. 6299919846

FOR ANIL PHARMA

Authorised Signatory

Continue Page.. 2