



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

Original for Buyer

Invoice No	A000075	L.R. No.	
Invoice Date	21-04-2023	L.R. Date	21-04-2023
P.O. No.	22355-1	Cases	0
P.O. Date	05-04-2023	Due Date	19-08-2023

BILL TO :
 DDC DISTRICT HOSPITAL KUSHINAGAR
 COMBINED DISTRICT HOSPITAL
 RABINDRA NAGAR ROAD, State : 09
 RABINDRA NAGAR DHOOS KUSHI NAGAR
 PHONE : 8506007856

Transport :-
 E-WAY BILL NO :-
 VEHICLE NO. :-
 STATION :- 09-UTTAR PRADESH

SHIPPED TO
 Name :- DISTRICT HOSPITAL
 ADDRESS :- DIALYSIS UNIT, DISTRICT COMBINED
 HOSPITAL RAVINDRA DHUS PADRAUNA
 KUSHINAGAR, UTTAR PRADESH-274304
 NUMBER :- 8506007856

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	63079090	FACE MASK 3 PLY EARLOOP BLUE		1000		000			0.00							
2	9018	HYPODERMIC STERILE SYRINGE 5ML	1*100	10		51812022	1/23	11/27	0.00	1.50	0.00	5.00	75.00	0.00	0.00	
3	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	40		6302023	3/23	1/28	0.00	195.00	0.00	12.00	234.00	0.00	0.00	
4	30049069	INJ ONDION (EMSET)		100		ION-10471	12/22	3/24	0.00	175.00	0.00	12.00	840.00	0.00	0.00	
5	3004	INJ PANTAPROZOLE 40MG		100		22GL091	12/22	5/24	0.00	4.80	0.00	12.00	57.60	0.00	0.00	
6	3004	INJ REVIL 1*50 (R)	1*50	2		FH-63		11/24	0.00	14.30	0.00	12.00	171.60	0.00	0.00	
7	9018	IV SET-ECCO		2000		IV130922	2/23	8/27	0.00	165.00	0.00	12.00	39.60	0.00	0.00	
8	4015	LATEX EXAM GLOVES S		60		000			0.00	6.50	0.00	12.00	1560.00	0.00	0.00	
9	3905	MICROPORE 3"		160		2302279	3/23	1/26	0.00	230.00	0.00	12.00	1656.00	0.00	0.00	
10	896812	Add FREIGHT CHARGES							0.00	75.00	0.00	12.00	1440.00	0.00	0.00	
										3225.00	0.00	18.00	580.50	0.00	0.00	3225.00

Stock/No. of Boxes Received 6
 Subject to Physical Check
 Name/Employee Code K. Anil A. 060248
 Centre Name KUSHINAGAR UP
 Date/Time 10/5/23 1:00 PM
 Signature [Signature] M. No. 704514047

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	TOTAL
IGST 5.00%	1500.00	0.00	0.00	75.00	0.00	10		54715.00
IGST 12.00%	49990.00	0.00	0.00	5998.80	0.00	3472		DIS AMT. 0.00
IGST 18.00%	3225.00	0.00	0.00	580.50	0.00			IGST PAYBLE 6654.30
IGST 28 %	0.00	0.00	0.00	0.00	0.00			PAYBLE 0.00
TOTAL	54715.00	0.00	0.00	6654.30	0.00			Round off -0.30

Rs. Sixty One Thousand Three Hundred Sixty Nine Only

OUR BANK DETAILS AS :-
 Bank Name : UJJIVAN SMALL FINANCE BANK
 Branch Name : ADARSH NAGAR
 Account No. : 220712004000335
 IFSC Code : UJVN0002207

FOR ANIL PHARMA

 Authorised Signatory

Grand Total
61369.00

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.