



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

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

Invoice No	A000966	Bill No.	
Invoice Date	19-09-2023	L.R. Date	19-09-2023
P.O. No.	23628	Cases	0
P.O. Date	06-09-2023	Due Date	17-01-2024

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

SHIPPED TO
Name :- DISTRICT HOSPITAL
Address:- DIALYSIS UNIT, DISTRICT HOSPITAL
RAVINADARA DHUS, PADRAUNA
KUSHI NAGAR, 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	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		✓500		0.00			0.00	0.90	0.00	5.00	22.50	0.00	450.00
3	4015	EXAM GLOVES (S)		✓80		0.00			0.00	230.00	0.00	12.00	2208.00	0.00	18400.00
4	30059040	FITSULA OFF KIT		✓1000		0.00			0.00	8.00	0.00	12.00	960.00	0.00	8000.00
5	30059040	FITSULA ON-KIT	700	1000		0.00			0.00	8.00	0.00	12.00	960.00	0.00	8000.00
6	3004	INJ BIOCETAMOL (PYREMOL) 2ML 1		✓100		13G011		6/25	0.00	5.10	0.00	12.00	61.20	0.00	510.00
7	30049099	INJ ETOPHYLINE & THEOPHYLINE 1	1*50	✓2		RE-90		3/25	0.00	230.00	0.00	12.00	55.20	0.00	460.00
8	3004	INJ FRUSAMIDE 1*50 (R) / LASI	1*50	✓2		FM-123		3/25	0.00	165.00	0.00	12.00	39.60	0.00	330.00
9	30049099	INJ HOSTRANIL 25000 IU		*✓400		HIHE23010A		5/25	0.00	130.00	0.00	12.00	6240.00	0.00	52000.00
10	3004	INJ PANTAPROZOLE 40MG		✓50		23GG25A		6/25	0.00	14.30	0.00	12.00	85.80	0.00	715.00
11	3005	MICROPORE 3"		✓120		2308119		7/26	0.00	75.00	0.00	12.00	1080.00	0.00	9000.00
12	996812	Add FREE SIGNATURE							0.00	3120.00	0.00	18.00	561.60	0.00	3120.00

Stock/No. of Boxes Received 9 BOX
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature M. No. 8918811

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST		TOTAL
IGST 5.00%	450.00	0.00	0.00	22.50	0.00	22.50	101935.00
IGST 12.00%	98365.00	0.00	0.00	11803.80	0.00	11803.80	DIS AMT. 0.0
IGST 18.00%	3120.00	0.00	0.00	561.60	0.00	561.60	IGST PAYBLE 12387.9
IGST 28 %	0.00	0.00	0.00	0.00	0.00	0.00	PAYBLE 0.0
TOTAL	101935.00	0.00	0.00	12387.90	0.00	12387.90	Round off 0.0

Rs. One Lakh Fourteen Thousand Three Hundred Twenty Three Only

OUR BANK DETAILS AS :-
Bank Name : UJJIVAN 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.

FOR ANIL PHARMA

Authorised Signatory

Grand Total
114323.00