



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	A000646	Bill No.	
Invoice Date	09-08-2023	L.R. Date	09-08-2023
P.O. No.	23435	Cases	0
P.O. Date	08-08-2023	Due Date	07-12-2023

BILL TO :
DCDC MGM HOSPITAL JAMSHEDPUR
MGM HOSPITAL , EAST SINGHMAM BAGH SAKCHI
DISTRICT JAMSHEDPUR State : 20
PHONE : 8506000152

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

SHIPPED TO
Name :- MGM HOSPITAL
Address:- DIALYSIS UNIT, MGM HOSPITAL
EAST SINGHBHAM SAKCHI, NEAR GANGA
ROD, JAMSHEDPUR, JHARKHAND-831001
NUMBER :- 8506000152

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	30049099	INJ HOSTRANIL 25000 IU		50		HIHE23010A		5/25	0.00	130.00	0.00	12.00	780.00	0.00	0.00	6500.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	6500.00
IGST 12.00%	6500.00	0.00	0.00	780.00	780.00	
IGST 18.00%	0.00	0.00	0.00	0.00	0.00	
IGST 28 %	0.00	0.00	0.00	0.00	0.00	
TOTAL	6500.00	0.00	0.00	780.00	780.00	

Rs. Seven Thousand Two Hundred Eighty 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



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

Grand Total
7280.00