

Duplicate for Transporter

**GST INVOICE**

**BILL TO :**  
 CDCDC SADAR HOSPITAL BOKARO  
 SADAR HOSPITAL,  
 CAMP NO-2, BOKARO- State : 20  
 JHARKHAND-827001  
 PHONE : 8506000228

Invoice No	A001062	Bill No.	16-10-2023
Invoice Date	16-10-2023	L.R. Date	2
P.O. No.	23867	Cases	2
P.O. Date	10-10-2023	Due Date	13-02-2024

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



**ANIL PHARMA**

C-58, RAJAN BABU ROAD,  
 ADARSH NAGAR, DELHI - 110033  
 Phone : 011-41557131, 9212300328  
 D.L.No. : 20B-137393 \ 21B-137394  
 GSTIN : 07AAPPG6291A1ZR  
 E-Mail : anilpharma1997@gmail.com

**SHIPPED TO**  
 Name :- SADAR HOSPITAL  
 DIALYSIS UNIT, SADAR HOSPITAL  
 ROOM NO-208 CAMP NO-2, NEAR DC OFFICE  
 BOKARO, JHARKHAND - 827001  
 NUMBER :- 8506000228

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	4015	EXAM GLOVES (M)		20		0.00		11/27	0.00	230.00	0.00	12.00	552.00	0.00	4600.00
2	63079090	FACE MASK 3 PLY EARLOOP BLUE		300		0.00			0.00	1.50	0.00	5.00	22.50	0.00	450.00
3	30059040	FITSULA OFF KIT		1000		0.00			0.00	8.00	0.00	12.00	960.00	0.00	8000.00
4	30059040	FITSULA ON-KIT		1000		0.00			0.00	8.00	0.00	12.00	960.00	0.00	8000.00
5	3004	INJ HYDROCOTISONE 100MG (EFFCO		25		23GF04M		5/25	0.00	23.50	0.00	5.00	29.38	0.00	587.50
6	30049039	INJ REVIL		50		W010		12/24	0.00	3.30	0.00	12.00	19.80	0.00	165.00
7	3005	MICROPORE 3"		12		2308119		7/26	0.00	75.00	0.00	12.00	108.00	0.00	900.00
8	9018	SHARP CONTAINER PLASTIC 3LTR		3		0.00			0.00	150.00	0.00	12.00	54.00	0.00	450.00
9	3901	SHOE COVER		100		0.00			0.00	1.95	0.00	18.00	35.10	0.00	195.00
10	996812	Add FREIGHT CHARGES				0.00			0.00	2230.00	0.00	18.00	401.40	0.00	2230.00

\* Discrepancy :-  
 Fightsela on Tst + and Exam  
 Catches -

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL	25577.50
IGST 5.00%	1037.50	0.00	0.00	51.88	51.88	DIS AMT.	0.00
IGST 12.00%	22115.00	0.00	0.00	2653.80	2653.80	IGST PAYABLE	3142.18
IGST 18.00%	2425.00	0.00	0.00	436.50	436.50	PAYABLE	0.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00	Round off	0.32
<b>TOTAL</b>	<b>25577.50</b>	<b>0.00</b>	<b>0.00</b>	<b>3142.18</b>	<b>3142.18</b>	<b>CR/DR NOTE</b>	<b>0.00</b>

Rs. Twenty Eight Thousand Seven Hundred Twenty Only

**FOR ANIL PHARMA**

**FOR BANK DETAILS AS :-**  
 Bank Name : UJJIVAN 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 .....  
 Signature .....  
 M. No. ....



Grand Total  
 28720.00

**Terms & Conditions**

Goods once sold will not be taken back or exchanged.  
 Bills not paid due date will attract 24% interest.  
 Participation only