



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	A001654	Bill No.	
Invoice Date	11-01-2024	L.R. Date	11-01-2024
P.O. No.	24709	Cases	3
P.O. Date	05-01-2024	Due Date	10-05-2024
Transport :- DELHIVERY PRIVATE LIMITED			
E-WAY BILL NO :-			
VEHICLE NO. :-			
STATION :- 36-TELANGANA			

Duplicate for Transporter

BILL TO :
DCDC DISTRICT HOSPITAL JANGAON
DISLYSIS UNIT, DISTRICT HOSPITAL
NEAR OPP. BSNL OFFICE, VEGETABLE MARKET State
JANGAON, TELANGANA - 506167
PHONE. : 8588850032

SHIPPED TO
Name :- DISTRICT HOSPITAL
DIALYSIS UNIT, DISTRICT HOSPITAL
Address:- OPP. BSNL OFFICE, VEGETABLE MARKET
JANGAON, TELANGANA - 506167
NUMBER :- 9014879397

84KJ
3 Box

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		1500		0.00			0.00	1.50	0.00	5.00	112.50	0.00	0.00	2250.00
2	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	20		51310023		9/28	0.00	175.00	0.00	12.00	420.00	0.00	0.00	3500.00
3	9018	IV SET-ECO		1000		HCR23016		6/26	0.00	6.50	0.00	12.00	780.00	0.00	0.00	6500.00
4	30049087	POVINANZ M/B POWDER		150		N0130500		7/26	0.00	15.00	0.00	12.00	270.00	0.00	0.00	2250.00
5	996812	Add FREIGHT CHARGES							0.00	2665.00	0.00	18.00	479.70	0.00	0.00	2665.00

Stock/No. of Boxes Received 03 Boxes
Subject to Physical Check
Name/Employee Code D.C.02.795
Centre Name D.H. Jangaon
Date/Time 10-01-2024 M. No. G. And
Signature G. And 9014879397

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	DIS AMT.	IGST PAYBLE	PAYBLE	Round off	CR/DR NOTE
IGST 5.00%	2250.00	0.00	0.00	112.50	0.00	5	2670	0.00	2062.20	0.00	-0.20	0.00
IGST 12.00%	12250.00	0.00	0.00	1470.00	0.00			0.00				
IGST 18.00%	2665.00	0.00	0.00	479.70	0.00			0.00				
IGST 28 %	0.00	0.00	0.00	0.00	0.00			0.00				
TOTAL	17165.00	0.00	0.00	2062.20	0.00							0.00

Rs. Nineteen Thousand Two Hundred Twenty Seven Only

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

FOR ANIL PHARMA

Authorised Signatory

Grand Total
19227.00

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.