



ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
Phone : 011-2617131, 9212300229
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GST INVOICE

Invoice No	A001703	Bill No.	
Invoice Date	17-01-2024	L.R. Date	17-01-2024
P.O. No.	24741	Cases	1
P.O. Date	05-01-2024	Due Date	16-05-2024

Transport :-
E-WAY BILL NO :-
VEHICLE NO :-
STATION :- 06-HARYANA

Duplicate for Transporter

BILL TO :
DCDC PREM HOSPITAL PANIPAT
PREM HOSPITAL LHDM & OP PREM HOSPITAL
BISHAN SARUP COLONY OPP. BUS STAND State : 06
PANIPAT HARYANA-132103
PHONE : 9671899298

SHIPPED TO
Name :- PREM HOSPITAL
Address:- DIALYSIS UNIT, PREM HOSPITAL
BISHAN SARUP COLONY, OPP BUS STAND
PANIPAT, HARYANA - 132103
NUMBER :- 9671899298

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	V Value	Amount
1	9018	SUPERLIFE 10ML						9/28	0.00	175.00	0.00	12.00	84.00	0.00	0.00
2	996812	Add FREIGHT CHARGES		4		161023			0.00	450.00	0.00	18.00	81.00	0.00	700.00
<p>Stock/No. of Boxes Received 01 Subject to Physical Check No. of Employee Code Dec 2024 Centre Date/Time 22/01/24 Signature M. No 9671899298</p>															

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	2	4	1150.00
IGST 12.00%	700.00	0.00	0.00	84.00	84.00			DIS AMT. 0.00
IGST 18.00%	450.00	0.00	0.00	81.00	81.00			IGST PAYBLE 165.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00			PAYBLE 0.00
TOTAL	1150.00	0.00	0.00	165.00	165.00			Round off 0.00
								CR/DR NOTE 0.00

Rs. One Thousand Three Hundred Fifteen 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

1315.00