



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	A001542	Bill No.	
Invoice Date	20-12-2023	L.R. Date	20-12-2023
P.O. No.	24445	Cases	1
P.O. Date	07-12-2023	Due Date	18-04-2024

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

Duplicate for Transporter

BILL TO :
DCCD CIVIL HOSPITAL HISAR
CIVIL HOSPITAL, TAYAL BAGH COLONY
NEAR BUS STAND, HISSAR State - 05
HARYANA-125001
PHONE. : 8506003111

SHIPPED TO

Name :- CIVIL HOSPITAL
Address:- DIALYSIS UNIT, CIVIL HOSPITAL
TAYAL BAGH COLONY, NEAR BUS STAND
HISAR, HARYANA - 125001
NUMBER :- 8506000594

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	8		51016023		9/28	0.00	175.00	0.00	12.00	168.00	0.00	0.00
2	30043913	INJ MEPDEX (DEXA)		50		MN231*68		4/25	0.00	7.00	0.00	12.00	42.00	0.00	0.00
3	3004	INJ PANTAPROZOLE 40MG		25		MN232*43		8/25	0.00	14.30	0.00	12.00	42.90	0.00	0.00
4	9018	IV SET-ECO		200		HCR23*16		6/26	0.00	6.50	0.00	12.00	156.00	0.00	0.00
5	9018	RMS CANULA 20NO		5		G22101*619		9/27	0.00	8.00	0.00	12.00	4.80	0.00	0.00
6	9018	RMS CANULA 22NO		5		G22111*658		10/27	0.00	8.00	0.00	12.00	4.80	0.00	0.00
7	996812	Add FREIGHT CHARGES							0.00	450.00	0.00	18.00	81.00	0.00	0.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL	3937.50
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	DIS AMT.	0.00
IGST 12.00%	3487.50	0.00	0.00	418.50	0.00	IGST PAYBLE	499.50
IGST 18.00%	450.00	0.00	0.00	81.00	0.00	PAYBLE	0.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00	Round off	0.00
TOTAL	3937.50	0.00	0.00	499.50	0.00	CR/DR NOTE	0.00

Rs. Four Thousand Four Hundred Thirty Seven 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.

Authorized Signatory

Grand Total

4437.00