



# 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	A001541	Bill No.	
Invoice Date	20-12-2023	L.R. Date	20-12-2023
P.O. No.	24417	Cases	2
P.O. Date	07-12-2023	Due Date	18-04-2024

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

Extra Copy

### BILL TO :

DCDC CIVIL HOSPITAL BAHADURGARH  
CIVIL HOSPITAL, DIALYSIS UNIT  
NADHYA MARG, OLD INDUSTRIAL AREA State : 06  
BAHADURGARH  
PHONE : 8506006622

### SHIPPED TO

CIVIL HOSPITAL  
DIALYSIS UNIT, CIVIL HOSPITAL  
MADHYA MARG, OLD INDUSTRIAL AREA  
BAHADURGARH, HARYANA - 124507  
NUMBER :- 8506006622

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Amount
1	6210	BUFFANT CAP		300	0.00	0.00			0.00	0.90	0.00	5.00	13.50	0.00
2	3005	DYNAPAST		5	EAB29	3/21	1/24		0.00	149.50	0.00	12.00	89.70	0.00
3	4015	EXAM GLOVES (S)		20	0.00	0.00			0.00	230.00	0.00	12.00	552.00	0.00
4	9018	HYPODERMIC STERILE SYRINGE 5ML	1*100	5	51510023		11/27		0.00	195.00	0.00	12.00	117.00	0.00
5	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	6	51010023		9/28		0.00	175.00	0.00	12.00	126.00	0.00
6	3901	SHOE COVER		500	0.00	0.00			0.00	1.95	0.00	18.00	175.50	0.00
7	996812	Add FREIGHT CHARGES							0.00	550.00	0.00	18.00	99.00	0.00

Stock/No. of Boxes Received ..... 2 Box  
Subject to Physical Check  
Name/Employee Code ..... D.00504  
Centre Name ..... Civil Hospital Bahadurgarh  
Date/Time ..... 26.12.23  
Signature ..... M. No. 8506006622



CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	TOTAL
IGST 5.00%	270.00	0.00	0.00	13.50	13.50	7	9167.50
IGST 12.00%	7372.50	0.00	0.00	884.70	884.70	836	DIS AMT. 0.00
IGST 18.00%	1525.00	0.00	0.00	274.50	274.50		IGST PAYBLE 1172.70
IGST 28 %	0.00	0.00	0.00	0.00	0.00		PAYBLE 0.00
<b>TOTAL</b>	<b>9167.50</b>	<b>0.00</b>	<b>0.00</b>	<b>1172.70</b>	<b>1172.70</b>		Round off -0.20
							CR/DR NOTE <b>0.00</b>

Rs. Ten Thousand Three Hundred Forty Only

### OUR BANK DETAILS AS :-

Bank Name : UJIVAN 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

10340.00