



# 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	A001484	Bill No.	
Invoice Date	14-12-2023	L.R. Date	14-12-2023
P.O. No.	24409-4	Cases	4
P.O. Date	07-12-2023	Due Date	12-04-2024
Transport :-			
E-WAY BILL NO :-			
VEHICLE NO. :-			
STATION :- 09-UTTAR PRADESH			

Extra Copy

**BILL TO :**  
DCDC DISTRICT HOSPITAL HATHRAS  
DCDC DIALYSIS CENTER, DISTRICT HOSPITAL  
ALIGARH ROAD, NEAR RAJ MANDIR TALAB STATE : 0  
CHAURAH, HATHRAS UTTAR PRADESH-204101  
PHONE : 8077095618

**SHIPPED TO**  
Name :- DISTRICT HOSPITAL  
Address:- DIALYSIS UNIT, DISTRICT HOSPITAL  
ALIGARH ROAD, TALAB CHAURAH,  
HATHRAS, UTTAR PRADESH - 204101  
NUMBER :- 8077095618

SIN	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount			
1	4015	EXAM GLOVES (N)	1*50	20		51010023		9/28	0.00	230.00	0.00	12.00	552.00	0.00	4600.00			
2	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	10		AD-195		9/24	0.00	175.00	0.00	12.00	210.00	0.00	1750.00			
3	3004	INJ ADRENALINE1ML 1*50(R)	1*50	1		13G011		6/25	0.00	245.00	0.00	12.00	29.40	0.00	245.00			
4	3004	INJ BIOCETAMOL (PYREMOL) 2ML 1		50		NN23205A		8/25	0.00	5.10	0.00	12.00	30.60	0.00	255.00			
5	3004	INJ HYDROCORTISONE 100MG (EFFCO		25		NN23214A		8/25	0.00	23.50	0.00	5.00	29.38	0.00	587.50			
6	3004	INJ ONDION ( EMSET )		50		NN23204B		8/25	0.00	4.80	0.00	12.00	28.80	0.00	240.00			
7	3004	INJ PANTAPROZOLE 40MG		50		W011		12/24	0.00	14.30	0.00	12.00	85.80	0.00	715.00			
8	30049039	INJ REVIL		50		HCR23007		4/26	0.00	3.30	0.00	12.00	19.80	0.00	165.00			
9	9018	IV SET-ECO		700		2307088		6/26	0.00	6.50	0.00	12.00	546.00	0.00	4550.00			
10	3005	MICROPORE 2"		18		2310151		9/26	0.00	46.60	0.00	12.00	100.66	0.00	838.80			
11	3005	MICROPORE 3"		24		UY20KBCYB		6/24	0.00	75.00	0.00	12.00	216.00	0.00	1800.00			
12	90259000	NIPRO GLUCO STRIP	1*100	1					0.00	850.00	0.00	12.00	102.00	0.00	850.00			
13	996812	ADD FREIGHT CHARGES							0.00	1965.00	0.00	18.00	353.70	0.00	1965.00			
<b>TOTAL</b>													18561.30	0.00	0.00	2304.14	2304.14	

Rs. Twenty Thousand Eight Hundred Sixty Five Only

### OUR BANK DETAILS AS :-

Bank Name : UJIVAN SMALL FINANCE BANK  
Branch Name : ADARSH NAGAR  
Account No. : 2207120040000335  
IFSC Code : UJVN0002207

### FOR ANIL PHARMA

Stock/No. of Boxes Received ..... 4 Box  
Subject to Physical Check .....  
Name of Buyer Code .....  
Centre Name .....  
Date/Time .....  
Signature .....  
Authorised Signatory

Grand Total

20865.00

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.