



# ANIL PHARMA

C-58, RAJAN BABU ROAD,  
 ADARSH NAGAR, DELHI - 110033  
 Phone : 011-41557131, 9212300328  
 D.L.No : 20B-137393 \ 21B-137394  
 GSTIN : 07AAPPG6291A1ZR  
 E-Mail : anilpharma1997@gmail.com

## GST INVOICE

Invoice No	A001236	Bill No.	16-11-2023
Invoice Date	16-11-2023	L.R. Date	16-11-2023
P.O. No.	24176	Cases	0
P.O. Date	06-11-2023	Due Date	15-03-2024

Transport :-  
 E-WAY BILL NO :-  
 VEHICLE NO. :-  
 STATION :- 09-UTTAR PRADESH

### Duplicate for Transporter

#### BILL TO :

DCDC DISTRICT HOSPITAL HATHRAS  
 DCDC DIALYSIS CENTER , DISTRICT HOSPITAL  
 ALIGARH ROAD, NEAR RAM MANDIR TALAB STATE . 0  
 CHAURAHA , HATHRAS UTTAR PRADESH-204101  
 PHONE : 8077095618

#### SHIPPED TO

DISTRICT HOSPITAL  
 DIALYSIS UNIT, DISTRICT HOSPITAL  
 ALIGARH ROAD, TALAB CHAURAHA  
 HATHRAS, UTTAR PRADESH - 204101  
 NUMBER :- 8077095618

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	4015	EXAM GLOVES (M)		20					0.00	230.00	0.00	12.00	552.00	0.00	4600.00

Stock/No. of Boxes Received ..... 230 X  
 Subject to Physical Check  
 Name/Employee Code: D.C. 2057 Shivam  
 Centre Name: D.H. Hathras - 6'00 P.M.  
 Date/Time: 16/11/23  
 Signature: Shivam M. No. 8077095618

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	1	4600.00
IGST 12.00%	4600.00	0.00	0.00	552.00	552.00	20	552.00
IGST 18.00%	0.00	0.00	0.00	0.00	0.00		0.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00		0.00
<b>TOTAL</b>	<b>4600.00</b>	<b>0.00</b>	<b>0.00</b>	<b>552.00</b>	<b>552.00</b>		<b>4600.00</b>

Rs. Five Thousand One Hundred Fifty Two 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

5152.00