



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	A000761	Bill No.	
Invoice Date	13-08-2023	L.R. Date	13-08-2023
P.O. No.	23426	Cases	0
P.O. Date	07-08-2023	Due Date	11-12-2023
Transport :- DELHIIVERY PRIVATE LIMITED			
E-WAY BILL NO:41359901340			
VEHICLE NO. :-			
STATION :- 09-UTTAR PRADESH			

Duplicate for Transporter

BILL TO :
DCCDC DISTRICT HOSPITAL PRAYAGRAJ
MOTILAL NEHRU HOSPITAL
MURABAD PRAYAGRAJ State - 09
UP-211003
PHONE : 7505825717

SHIPPED TO
Name :- DISTRICT HOSPITAL
Address:- DIALYSIS UNIT, DISTRICT HOSPITAL
14 DOCTOR KN KATJUR ROAD MURABAD
PRAYAGRAJ, UTTAR PRADESH - 211003
NUMBER :- 7505825717

S/N	HSN	Product Name	Pack	Qty	Frech	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	1015	EXAM GLOVES (M)		90	0.00	0.00			0.00	230.00	0.00	12.00	2484.00	0.00	0.00
2	63079990	FACE MASK 3 PLY EARLOOP BLUE		500	0.00	0.00			0.00	1.50	0.00	1.50	37.50	0.00	0.00
3	30054040	FITSULA OFF KIT		2800	0.00	26706023			0.00	8.00	0.00	12.00	2688.00	0.00	0.00
4	9018	HYPO-ERMIC STERILE SYRINGE 5ML		5	0.00	23705023		5/28	0.00	195.00	0.00	12.00	117.00	0.00	0.00
5	9018	HYPO-ERMIC STERILE SYRINGE 10ML		30	0.00	23705023		4/28	0.00	175.00	0.00	12.00	630.00	0.00	0.00
6	3004	IND HYDROGOTTISONE 100MG (EFFCO		50	0.00	023AM016		5/25	0.00	23.50	0.00	5.00	58.75	0.00	0.00
7	300-19063	IND ONDION (EMSET)		50	0.00	23CF04M		12/24	0.00	4.80	0.00	12.00	28.80	0.00	0.00
8	3004	IND PANTAPROZOLE 40MG		100	0.00	23CF07M		9/24	0.00	14.30	0.00	12.00	171.60	0.00	0.00
9	3004	IND RENOPHYLINE 10ML 1*50(R)		1	0.00	RP 116		5/25	0.00	285.00	0.00	12.00	34.20	0.00	0.00
10	300-1003	IND RENOPHYLINE 10ML 1*50(R)		1	0.00	W010		9/24	0.00	3.30	0.00	12.00	39.60	0.00	0.00
11	3001	IND S.B.C 10ML 1*50 (R)		1	0.00	SR 278		10/24	0.00	305.00	0.00	12.00	36.60	0.00	0.00
12	9018	IV SET-ECO		1000	0.00	HICR23007		4/26	0.00	6.50	0.00	12.00	780.00	0.00	0.00
13	3808	KLACII LIQUID HAND SANITIZER 5		5	0.00	HS03HL		3/26	0.00	580.00	0.00	18.00	522.00	0.00	0.00
14	300-19087	POVINAZ M/B POWDER		5	0.00	Not300079			0.00	15.00	0.00	12.00	90.00	0.00	0.00
15	9018	PULSE OXYMETER		5	0.00				0.00	950.00	0.00	12.00	570.00	0.00	0.00
16	3501	SHOE COVER		5	0.00				0.00	1.95	0.00	12.00	175.50	0.00	0.00
17	996812	Add FREIGHT CHARGES		500	0.00				0.00	5245.00	0.00	18.00	944.10	0.00	0.00
TOTAL															
TOTAL				9407.65	0.00										
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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 subj. to Jurisdiction only.

FOR ANIL PHARMA
Stock No. :
Signature :
N.Center :
C.Date/Ti :
Date/Time :
Signature :
M.No. : 82517
Authorized Signatory M. No. :
Signe

Grand Total
84368.00

TOTAL
DIS AMT. 0.00
IGST PAYABLE 9407.65
PAYABLE 0.00
Round off 0.35
CRDR NOTE