



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	A001194	Bill No	
Invoice Date	14-11-2023	L.R. Date	14-11-2023
P.O. No.	24122	Cases	0
P.O. Date	06-11-2023	Due Date	13-03-2024

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

Duplicate for Transporter

BILL TO :
DCDC CIVIL HOSPITAL GHAZIABAD
DISTRICT COMBINED HOSPITAL
SECTOR 23, GHAZIABAD-201001 State 09

PHONE : 8506002727

SHIPPED TO
Name :- DISTRICT HOSPITAL
DIALYSIS UNIT, DISTRICT HOSPITAL
Address:- SECTOR - 23, GHAZIABAD
UTTAR PRADESH - 201001
NUMBER :- 8506002727

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)		130					0.00	230.00	0.00	12.00	3588.00	0.00	0.00	29900.00

Stock/No. of Boxes Received 2
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time 15.11.2023
M. No. 8506002727
AP

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	1	130	29900.00
IGST 12.00%	29900.00	0.00	0.00	3588.00	0.00			3588.00
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
TOTAL	29900.00	0.00	0.00	3588.00	0.00			3588.00

Rs. Thirty Three Thousand Four Hundred Eighty Eight Only

OUR BANK DETAILS AS :-
Bank Name : UJJIVAN SMALL FINANCE BANK
Branch Name : ADARSH NAGAR
Account No. : 2207120040000335
IFSC Code : UJVN0002207

FOR ANIL PHARMA



Authorized Signatory

Grand Total

33488.00

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.