



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	A000077	L.R. No.	
Invoice Date	22-04-2023	L.R. Date	22-04-2023
P.O. No.	22333-3	Cases	0
P.O. Date	06-04-2023	Due Date	20-08-2023

Duplicate for Transporter

BILL TO :
DCDC DISTRICT HOSPITAL MAINPURI
DIALYSIS CENTER, MAHARAJA TEJ PRATAP
SINGH DISTRICT HOSPITAL, MAINPURI State : 09
UTTAR PRADESH-205001
PHONE : 9713740406

SHIPPED TO
DISTRICT HOSPITAL
DIALYSIS UNIT, MAHARAJA TEJ PRATAP SINGH
DISTRICT HOSPITAL, MAIN PURI
UTTAR PRADESH - 205001
NUMBER : 9713740406

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	3004	CIPPLADINE OINTMENT		2		SFG220068	2/23	11/24	0.00	19.00	0.00	12.00	4.56	0.00	38.00
2	9018	HYPODERMIC STERILE SYRINGE 10M	1*50	20		6302023	3/23	1/28	0.00	175.00	0.00	12.00	420.00	0.00	3500.00
3	3004	INU BIOCETAMOL (PYREMOL) 2ML 1		50		SFB220050	9/22	2/24	0.00	5.10	0.00	12.00	30.60	0.00	255.00
4	30049069	INU ONDION (EMSET)		50		ION-10471	12/22	3/24	0.00	4.80	0.00	12.00	28.80	0.00	240.00
5	90189012	STETHSCOPE ASC		2					0.00	185.00	0.00	12.00	44.40	0.00	370.00
6	996812	Add FREIGHT CHARGES							0.00	800.00	0.00	18.00	144.00	0.00	800.00
TOTAL													672.36	672.36	5203.00

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

Rs. Five Thousand Eight Hundred Seventy Five 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

5875.00

TOTAL	5203.00
DIS AMT.	0.00
IGST PAYABLE	672.36
PAYABLE	0.00
Round off	-0.36
CRDR NOTE	0.00