



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	A000597	Bill No.	
Invoice Date	02-08-2023	L.R. Date	02-08-2023
P.O. No.	23105	Cases	0
P.O. Date	05-07-2023	Due Date	30-11-2023

Transport :-
E-WAY BILL NO :-
VEHICLE NO. :-
STATION :- 06-HARYANA

Original for Buyer

BILL TO :
DCDC CIVIL HOSPITAL JHAJJAR
CIVIL HOSPITAL
JHAJJAR State : 06
HARYANA-124106
PHONE. : 8901880466

SHIPPED TO
Name :- CIVIL HOSPITAL
DIALYSIS UNIT, CIVIL HOSPITAL
Address:- JHAJJAR, HARYANA - 124106
NUMBER :- 8901880466

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	3005	MICROPORE 3"		100		2307083		6/26	0.00	75.00	0.00	12.00	900.00	0.00	7500.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	7500.00
IGST 12.00%	7500.00	0.00	0.00	900.00	900.00	
IGST 18.00%	0.00	0.00	0.00	0.00	0.00	
IGST 28 %	0.00	0.00	0.00	0.00	0.00	
TOTAL	7500.00	0.00	0.00	900.00	900.00	7500.00

Rs. Eight Thousand Four Hundred 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

Stock/No. of Boxes Received 01
Subject to Physical Check OK
Name/Employee Code DIKASH/DCDC Grand Total
Centre Name C.H. JHAJJAR
Date/Time 07-08-23/04:30pm 8400.00
Signature [Signature] M. No. 9487103447