



ANIL PHARMA

C-5S, 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	A001798	Bill No.	
Invoice Date	08-02-2024	L.R. Date	08-02-2024
P.O. No.	25028	Cases	1
P.O. Date	07-02-2024	Due Date	07-06-2024

Transport :-
E-WAY BILL NO :-
VEHICLE NO :-
STATION :- 36-TELANGANA

Original for Buyer

BILL TO :
COMMON HEALTH CENTER ASHWARAOPET
DIALYSIS CENTER GOVT HOSPITAL ASHWARAOPET
DIST KOTHAGUDEM, TELANGANA - 507301 State

PHONE 8588850032

SHIPPED TO
Name :- COMMON HEALTH CENTER
DIALYSIS UNIT, COMMON HEALTH CENTER
Address:- GOVT. HOSPITAL, BHADRADARI KOTHAGUDEM
ASHWARAOPET, TELANGANA - 507301
NUMBER :- 9121447080

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	9315	HYPODERMIC STERILE SYRINGE 10M	1*50	4		86012023		11/28	0.00	175.00	0.00	12.00	84.00	0.00	0.00	700.00
2	3901	SHOE COVER		500		0.00			0.00	1.95	0.00	18.00	175.50	0.00	0.00	975.00
3	996812	Add FREIGHT CHARGES							0.00	830.00	0.00	18.00	149.40	0.00	0.00	830.00

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL	2505.00
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00	
IGST 12.00%	700.00	0.00	0.00	84.00	0.00	84.00	
IGST 18.00%	1805.00	0.00	0.00	324.90	0.00	324.90	
IGST 28 %	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	2505.00	0.00	0.00	408.90	0.00	408.90	

Rs Two Thousand Nine Hundred Fourteen 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

Authorized Signatory

Stock/No. of Boxes Received 1
Subject to Physical Check
Name/Employee Code Alami Ram 2814004
Centre Name ASHWARAOPET
Date/Time 08/02/2024 at 6pm
Signature [Signature] M.No

Grand Total