

Original for Buyer

GST INVOICE

BILL TO :
DCDC CIVIL HOSPITAL SONEPAT
CIVIL HOSPITAL SONEPAT
State : 06

PHONE : 8506004422

SHIPPED TO
Name :- CIVIL HOSPITAL
DIALYSIS UNIT, CIVIL HOSPITAL
Address:- SONIPAT, HARYANA - 131001

NUMBER :- 8814006638

Invoice No	A001744	Bill No.	
Invoice Date	19-01-2024	L.R. Date	19-01-2024
P.O. No.	24841	Cases	5
F.O. Date	05-01-2024	Due Date	18-05-2024

Transport :- BY HAND

E-WAY BILL NO :-

VEHICLE NO :-

STATION :- 06-HARYANA

ANIL PHARMA

C-58, RAJAN BABU ROAD,
ADARSH NAGAR, DELHI - 110033
Phone : 011-41557131, 9212300328
D.L.No. : 20B-137393 \ 21B-137394
GSTIN : 07AAPPG6291AYZR
E-Mail : anilpharma1997@gmail.com

S.N	HSN	Product Name	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	3004	ISOPROPYL ALCOHOL (SPIRIT)	50		18		9/26	0.00	595.00	0.00	12.00	1428.00	0.00	11900.00

Stock/No. of Boxes Received 5 - Box
 Subject to Physical Check
 Dealer/Employee Code
 Centre Name Civil Hospital Sonapat
 Date/Time 20-1-2024
 Signature Kusum Devi - M. No. 8366122192

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00
IGST 12.00%	11900.00	0.00	0.00	1428.00	1428.00	1428.00
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	11900.00	0.00	0.00	1428.00	1428.00	11900.00

Rs. Thirteen Thousand Three Hundred Twenty Eight Only

OUR BANK DETAILS AS :-

Bank Name : UJJIVAN SMALL FINANCE BANK
Branch Name : ADARSH NAGAR
Account No. : 22071200400000335
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

13328.00

