

Triplicate for Assessee

GST INVOICE

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

PHONE : 8506004422

SHIPPED TO
Name :- DCDC CIVIL HOSPITAL SONEPAT
ADDRESS :- DCDC CIVIL HOSPITAL SONEPAT
NUMBER :-

Invoice No	A000293	L.R. No.	01-06-2023
Invoice Date	01-06-2023	L.R. Date	0
P.O. No.	22514-1	Cases	
P.O. Date	04-05-2023	Due Date	01-06-2023

Transport :- BY HAND
E-WAY BILL NO :-
VEHICLE NO :- 18-47
STATION :- GSI, HAFAYANA

ANIL PHARMA
-58, RAJAN BABU ROAD,
RSH NAGAR, DELHI - 110033
: 011-41557131, 02123000328
00B-137393, 215-137394
APPG629141ZR
pharma1997@gmail.com

Product Name	Free	Pack Qty	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
IV SET-ECO		700	WGT0123		12/27	0.00	6.50	0.00	12.00	546.00	0.00	4550.00

Stock/No. of boxes received : 1
Subject to Physical Check : DC.01315
Name/Employee Code : Hospital Sonepat
Signature : M. No. 8506004422

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%	4550.00	0.00	0.00	546.00	5004.00	546.00
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	4550.00	0.00	0.00	546.00	5096.00	4550.00

Rs. Five Thousand Ninety Six Only

OUR BANK DETAILS AS :-
Bank Name : UJJIVAN SMALL FINANCE BANK
Branch Name : ADARSH NAGAR
Account No. : 2207120040000335
IFSC Code : UJVN002207

FOR ANIL PHARMA

Authorised Signatory

Grand Total 5096.00

Terms & Conditions
Goods once sold will not be taken back or exchanged.