



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	A000726	Bill No.	
Invoice Date	12-08-2023	L.R. Date	12-08-2023
P.O. No.	23364	Cases	0
P.O. Date	08-08-2023	Due Date	10-12-2023

Transport :-
E-WAY BILL NO :-
VEHICLE NO. :-
STATION :- 09-UTTAR PRADESH

Duplicate for Transporter

BILL TO :
DCDC DISTRICT HOSPITAL MAHARAJGANJ
DIALYSIS CENTER, DISTRICT HOSPITAL
FAREDA ROAD, NEAR HEADQUARTERS State : 09
MAHARAJGANJ, UTTAR PRADESH-273303
PHONE. : 9729818661

SHIPPED TO

Name :- DISTRICT HOSPITAL
Address:- DIALYSIS UNIT, DISTRICT HOSPITAL
FAREDA ROAD, NEAR HEAD QUATERS
MAHARAJGANJ, UTTAR PRADESH - 273303
NUMBER :- 9792818661

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	30049099	INJ HOSTRANIL 25000 IU		120		HIHE23010A		5/25	0.00	130.00	0.00	12.00	1872.00	0.00	0.00	15600.00

DCDCHSPL CENTRE-DIST. HOSPITAL MAHARAJGANJ
MATERIAL RECEIVED

DATE 16/8/23

TIME 12:10 PM RECEIVED BY Raina Topotho

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL	15600.00
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00	
IGST 12.00%	15600.00	0.00	0.00	1872.00	0.00	1872.00	
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	15600.00	0.00	0.00	1872.00	0.00	1872.00	

Rs. Seventeen Thousand Four Hundred Seventy Two 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

Grand Total

17472.00