

Original for Buyer

**GST INVOICE**



**ANIL PHARMA**

C-58, RAJAN BABU ROAD,  
ADARSH NAGAR, DELHI - 110033  
Phone : 011-41557131, 9212300328  
D.L.No. : 20B-137393 \ 21B-137394  
GSTIN : 07AAPPG6291A1ZR  
E-Mail : anilpharma1997@gmail.com

**BILL TO :**  
DCDC MISSION HOSPITAL BAREILY  
DIALYSIS UNIT , MISSION HOSPITAL  
CLARA SWAIN MISSION HOSPITAL, CAMPUS 99 State  
CIVIL LINES, BAREILY , UP-243001  
PHONE. : 9084921959

**SHIPPED TO**

MISSION HOSPITAL  
Name :- CLARA SWAIN MISSION HOSPITAL  
ADDRESS :- DIALYSIS UNIT, CAMPUS, CIVIL LINES  
BAREILY , UTTAR PRADESH - 243001  
NUMBER :- 9084921959

|              |            |           |            |
|--------------|------------|-----------|------------|
| Invoice No   | A000073    | L.R. No.  |            |
| Invoice Date | 21-04-2023 | L.R. Date | 21-04-2023 |
| P.O. No.     | 22303-2    | Cases     | 0          |
| P.O. Date    | 06-04-2023 | Due Date  | 19-08-2023 |

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

| S.N | HSN      | Product Name         | Pack  | Qty | Free | Batch      | Mfg   | Exp   | M.R.P | Rate   | Dis  | IGST  | Value  | Value | Amount  |
|-----|----------|----------------------|-------|-----|------|------------|-------|-------|-------|--------|------|-------|--------|-------|---------|
| 1   | 6210     | BUFFANT CAP          |       | 100 |      | 0.00       |       |       | 0.00  | 0.90   | 0.00 | 5.00  | 4.50   | 0.00  | 90.00   |
| 2   | 4015     | EXAM GLOVES LATEX    |       | 5   |      | 2302DF0    |       | 1/28  | 0.00  | 230.00 | 0.00 | 12.00 | 138.00 | 0.00  | 1150.00 |
| 3   | 3005     | G PLAST              |       | 5   |      | IV130922   |       | 8/27  | 0.00  | 75.00  | 0.00 | 12.00 | 45.00  | 0.00  | 375.00  |
| 4   | 9018     | IV SET-ECO           |       | 200 |      | 2302279    | 2/23  | 1/26  | 0.00  | 6.50   | 0.00 | 12.00 | 156.00 | 0.00  | 1300.00 |
| 5   | 3005     | MICROPORE 3"         |       | 16  |      | 221134     | 3/23  | 4/27  | 0.00  | 75.00  | 0.00 | 12.00 | 144.00 | 0.00  | 1200.00 |
| 6   | 90183100 | NIPRO NEEDLE 26G     | 1*100 | 1   |      | G221220935 | 9/22  | 11/27 | 0.00  | 85.00  | 0.00 | 12.00 | 10.20  | 0.00  | 85.00   |
| 7   | 9018     | RMS 10ML SYRINGE     | 1*50  | 4   |      | G221020677 | 3/23  | 9/27  | 0.00  | 225.50 | 0.00 | 12.00 | 108.24 | 0.00  | 902.00  |
| 8   | 9018     | RMS SYRINGE 5ML      |       | 2   |      |            | 12/22 | 9/27  | 0.00  | 255.00 | 0.00 | 12.00 | 61.20  | 0.00  | 510.00  |
| 9   | 3901     | SHOE COVER           |       | 300 |      | 0.00       |       |       | 0.00  | 1.95   | 0.00 | 18.00 | 105.30 | 0.00  | 585.00  |
| 10  | 4015     | SURGICARE GLOVES 7NO |       | 200 |      | 0.00       |       |       | 0.00  | 16.00  | 0.00 | 12.00 | 384.00 | 0.00  | 3200.00 |
| 11  | 996812   | Add FREIGHT CHARGES  |       |     |      |            |       |       | 0.00  | 500.00 | 0.00 | 18.00 | 90.00  | 0.00  | 500.00  |

| CLASS        | TOTAL          | SCHEME      | DISCOUNT    | IGST           | TOTAL IGST     | DIS         | IGST         | Value        | Amount      |
|--------------|----------------|-------------|-------------|----------------|----------------|-------------|--------------|--------------|-------------|
| IGST 5.00%   | 90.00          | 0.00        | 0.00        | 4.50           | 4.50           | 0.00        | 5.00         | 4.50         | 0.00        |
| IGST 12.00%  | 8722.00        | 0.00        | 0.00        | 1046.64        | 1046.64        | 0.00        | 12.00        | 138.00       | 0.00        |
| IGST 18.00%  | 1085.00        | 0.00        | 0.00        | 195.30         | 195.30         | 0.00        | 12.00        | 156.00       | 0.00        |
| IGST 28 %    | 0.00           | 0.00        | 0.00        | 0.00           | 0.00           | 0.00        | 12.00        | 144.00       | 0.00        |
| <b>TOTAL</b> | <b>9897.00</b> | <b>0.00</b> | <b>0.00</b> | <b>1246.44</b> | <b>1246.44</b> | <b>0.00</b> | <b>18.00</b> | <b>90.00</b> | <b>0.00</b> |

Rs. Eleven Thousand One Hundred Forty Three Only

**OUR BANK DETAILS AS :-**

Bank Name : UJJIVAN SMALL FINANCE BANK  
Branch Name : ADARSH NAGAR  
Account No. : 2207120040000335  
IFSC Code : UJVN0002207



FOR ANIL PHARMA

Authorised Signatory

Grand Total

11143.00

**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.