



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	A001361	Bill No.	
Invoice Date	25-11-2023	L.R. Date	25-11-2023
P.O. No.	24261	Cases	1
P.O. Date	06-11-2023	Due Date	24-03-2024
Transport :-			
E-WAY BILL NO :-			
VEHICLE NO. :-			
STATION :- 36-TELANGANA			

BILL TO :
 DDCG GANDHI HOSPITAL SECUNDRABAD
 GANDHI HOSPITAL, BHOIGUDA MUSHERRABAD
 DIST. HYDRABAD, TELANGANA - 500020 State : 36
 PHONE : 8588850032

SHIPPED TO
 Name :- GANDHI HOSPITAL
 Address:- DIALYSIS UNIT, GANDHI HOSPITAL
 BHOIGUDA MUSHERRABAD, HYDERABAD
 TELANGANA - 500020
 NUMBER :- 7793985614

Original for Buyer

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	9018	GREEN LIFE 5ML SVR		10		370323		2/28	0.00	195.00	0.00	12.00	234.00	0.00	0.00	1950.00
2	996812	ADD FREIGHT CHARGES							0.00	890.00	0.00	18.00	160.20	0.00	0.00	890.00
TOTAL													2840.00	0.00	2840.00	

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	DIS AMT.	IGST PAYABLE	PAYABLE	Round off	CR/DR NOTE
IGST 5.000%	0.00	0.00	0.00	0.00	0.00	2	10					0.00
IGST 12.000%	1950.00	0.00	0.00	234.00	234.00							394.20
IGST 18.000%	890.00	0.00	0.00	160.20	160.20							0.00
IGST 28 %	0.00	0.00	0.00	0.00	0.00							-0.20
TOTAL	2840.00	0.00	0.00	394.20	394.20							0.00

OUR BANK DETAILS AS :-
 Bank Name : UJIVAN 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.

Stock/No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature

FOR ANIL PHARMA
 Authorised Signatory

 Grand Total
 3234.00