



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	A001126	Bill No.	
Invoice Date	19-10-2023	L.R. Date	19-10-2023
P.O. No.	23925	Cases	0
P.O. Date	10-10-2023	Due Date	16-02-2024

Original for Buyer

BILL TO :
 DCDC CIVIL HOSPITAL JIND
 CIVIL HOSPITAL
 JIND - GOHANA ROAD . JIND State : 06
 HARYANA-126102
 PHONE : 8506000584

SHIPPED TO

Name :-
Address:- DIALYSIS UNIT, CIVIL HOSPITAL
 JIND GOHANA ROAD , JIND
 HARYANA - 126102

NUMBER :-

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	4015	EXAM GLOVES (M)		100					0.00	230.00	0.00	12.00	2760.00	0.00	0.00	23000.00
2	996812	Add FREIGHT CHARGES							0.00	2420.00	0.00	18.00	435.60	0.00	0.00	2420.00

Quantity of Boxes Received 100 P.K.T.
 Subject to Invoice Check
 Name of Buyer Shubham
 Centre Name DCDC Civil Hospital
 Date/Time 23/10/23
 Signature [Signature] 895012840

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
ST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00
ST 12.00%	23000.00	0.00	0.00	2760.00	0.00	2760.00
ST 18.00%	2420.00	0.00	0.00	435.60	0.00	435.60
ST 28 %	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	25420.00	0.00	0.00	3195.60	0.00	3195.60

Total Items :- 2
 Total Qty :- 100

TOTAL	25420.00
DIS AMT.	0.00
IGST PAYBLE	3195.60
PAYBLE	0.00
Round off	0.40
CR/DR NOTE	0.00
TOTAL	0.00

Twenty Eight Thousand Six Hundred Sixteen Only

BANK DETAILS AS :-

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

FOR ANIL PHARMA

Authorized Signatory

Grand Total

28616.00

Terms & Conditions

Goods once sold will not be taken back or exchanged.
 Payment not paid due date will attract 24% interest.
 Disputes subject to Jurisdiction only.