



**ANIL PHARMA**

B, RAJAN BABU ROAD,  
ADARSH NAGAR, DELHI - 110033  
Phone : 011-41557131, 9212300328  
No. : 20B-137393 \ 21B-137394  
PIN : 07AAPP6291A1ZR  
Email : anilpharma1997@gmail.com

**GST INVOICE**

Invoice No	A000685	Bill No.	
Invoice Date	11-08-2023	L.R. Date	11-08-2023
P.O. No.	23440	Cases	40
P.O. Date	07-08-2023	Due Date	09-12-2023

Transport :- DELHIVERY PRIVATE LIMITED  
E-WAY BILL NO: 091359017374  
VEHICLE NO. :-  
STATION :- 09-UTTAR PRADESH

**Duplicate for Transporter**

**BILL TO :**  
DCDC MEDICAL COLLEGE BHU VARANASI  
DEPT OF NEPHROLOGY DIALYSIS UNIT  
SIR SUNDER LAL HOSPITAL BANARAS HINDU State  
UNIVERSITY , LANKA VARANASI  
PHONE : 8506000492

**SHIPPED TO**

Name :- MEDICAL COLLEGE BHU  
Address:- DIALYSIS UNIT, DEPT. OF NEPHROLOGY  
SIR SUNDER LAL HOSPITAL , LANKA  
BHU , VARANASI, UTTAR PRADESH - 221005  
NUMBER :- 8506000492

HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
90189029	BLUE PUNCTURE 10LTR		50					0.00	240.00	0.00	12.00	1440.00	0.00	0.00	12000.00
4015	EXAM GLOVES (M)		250					0.00	230.00	0.00	12.00	6900.00	0.00	0.00	57500.00
63079090	FACE MASK 3 PLY EARLOOP BLUE		2000		0.00			0.00	1.50	0.00	5.00	150.00	0.00	0.00	3000.00
9018	HYPODERMIC STERILE SYRINGE 5ML	1*100	1		26406023		5/28	0.00	195.00	0.00	12.00	23.40	0.00	0.00	195.00
9018	HYPODERMIC STERILE SYRINGE 10M	1*50	50		23705023		4/28	0.00	175.00	0.00	12.00	1050.00	0.00	0.00	8750.00
90183100	HYPODERMIC 20ML SYRINGE	1*25	4		54111021	3/22	10/26	0.00	250.00	0.00	12.00	120.00	0.00	0.00	1000.00
3004	INJ BIOCETAMOL (PYREMOL) 2ML 1		200		Q22AM065		1/24	0.00	5.10	0.00	12.00	122.40	0.00	0.00	1020.00
3005	MICROPORE 3"		800		2307083		6/26	0.00	75.00	0.00	12.00	7200.00	0.00	0.00	60000.00
30049087	POVINANZ 5% 2LTR ( BETADINE		5		N0130187		4/25	0.00	390.00	0.00	12.00	234.00	0.00	0.00	1950.00
30049087	POVINANZ M/B POWDER		200		N0130079		3/26	0.00	15.00	0.00	12.00	360.00	0.00	0.00	3000.00
9018	PULSE OXYMETER		2		0.00			0.00	950.00	0.00	12.00	228.00	0.00	0.00	1900.00
4015	SURGICARE GLOVES 7NO		1500		0.00			0.00	16.00	0.00	12.00	2880.00	0.00	0.00	24000.00

Stock/No. of Boxes Received 40 Boxes  
Subject to Physical Check Yes  
Name Employee Code Sumit Patil  
Centre Name DCDC - BHU  
Date/Time 16-08-23 5:00pm  
Signature [Signature] ID No. 9125619911

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
ST 5.00%	3000.00	0.00	0.00	150.00	0.00	150.00
ST 12.00%	171315.00	0.00	0.00	20557.80	0.00	20557.80
ST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00
ST 28 %	0.00	0.00	0.00	0.00	0.00	0.00
<b>TOTAL</b>	<b>174315.00</b>	<b>0.00</b>	<b>0.00</b>	<b>20707.80</b>	<b>0.00</b>	<b>20707.80</b>

One Lakh Ninety Five Thousand Twenty Three Only

**BANK DETAILS AS :-**

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

FOR ANIL PHARMA

Authorized Signatory

Grand Total

195023.00

**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.



**ANIL PHARMA**

RAJAN BABU ROAD,  
ADARSH NAGAR, DELHI - 110033  
Phone : 011-41557131, 9212300328  
Fax : 20B-137393 \ 21B-137394  
PIN : 07AAPP6291A1ZR  
Email : anilpharma1997@gmail.com

**GST INVOICE**

Invoice No	A000686	Bill No.	
Invoice Date	11-08-2023	L.R. Date	11-08-2023
P.O. No.	23440	Cases	0
P.O. Date	07-08-2023	Due Date	09-12-2023

Transport :- DELHIVERY PRIVATE LIMITED  
E-WAY BILL NO:01359018862  
VEHICLE NO. :-  
STATION :- 09-UTTAR PRADESH

**Duplicate for Transporter**

**BILL TO :**  
DCDC MEDICAL COLLEGE BHU VARANASI  
DEPT OF NEPHROLOGY DIALYSIS UNIT  
SIR SUNDER LAL HOSPITAL BANARAS HINDU State :  
UNIVERSITY, LANKA VARANASI  
PHONE. : 8506000492

**SHIPPED TO**

Name :- MEDICAL COLLEGE BHU  
DIALYSIS UNIT, DEPT. OF NEPHROLOGY  
Address:- SIR SUNDER LAL HOSPITAL, BHU LANKA  
VARANASI, UTTAR PRADESH - 221005  
NUMBER :- 8506000492

HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
30049099 996812	INJ HOSTRANIL 25000 IU Add FREIGHT CHARGES		800		HHHE23010A		5/25	0.00 0.00	130.00 9415.00	0.00 0.00	12.00 18.00	12480.00 1694.70	0.00 0.00	0.00 0.00	104000.00 9415.00

Stock/No. of Boxes Received 2 Box  
Subject to Physical Check Yes  
Name/Employee Code Sumit Pathak  
Centre Name DCDC BHU  
Date/Time 16-08-23-5:00Pm  
Signature Sumit M. No. 9125612311

LASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	DIS AMT.	IGST PAYBLE	PAYBLE	Round off	CR/DR NOTE
ST 5.00%	0.00	0.00	0.00	0.00	0.00	2	800	0.00	14174.70	0.00	0.30	0.00
ST 12.00%	104000.00	0.00	0.00	12480.00	12480.00							
ST 18.00%	9415.00	0.00	0.00	1694.70	1694.70							
ST 28 %	0.00	0.00	0.00	0.00	0.00							
<b>TOTAL</b>	<b>113415.00</b>	<b>0.00</b>	<b>0.00</b>	<b>14174.70</b>	<b>14174.70</b>							<b>0.00</b>

One Lakh Twenty Seven Thousand Five Hundred Ninety Only

**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**  
**127590.00**

**Terms & Conditions**  
Goods once sold will not be taken back or exchanged.  
Interest not paid due date will attract 24% interest.  
Disputes subject to Jurisdiction only.