



L PHARMA

38, RAJAN BABU ROAD,
 DARSH NAGAR, DELHI - 110033
 Phone : 011-41557131, 9212300328
 DL No. : 20B-137393 \ 21B-137394
 GSTIN : 07AAPP66291A1ZR
 E-Mail : anilpharma1997@gmail.com

GST INVOICE

Original for Buyer

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

PHONE : 8588850032

SHIPPED TO

GANDHI HOSPITAL
 DIALYSIS UNIT, GANDHI HOSPITAL
 BHOIGUDA MUSHERRABAD, HYDERABAD
 TELANGANA - 500020
 NUMBER :- 6300817103

Invoice No	A001169	Bill No.	02-11-2023
Invoice Date	02-11-2023	L.R. Date	0
P.O. No.	23877-1	Cases	0
P.O. Date	05-10-2023	Due Date	01-03-2024

Transport :
 E-WAY BILL NO :
 VEHICLE NO :
 STATION :- 36-TELANGANA

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount
1	30022012	INU BEVAC 10ML		15		220500823A	4/26	0.00	0.00	595.00	0.00	5.00	446.25	0.00	8925.00
2	996612	Add FREIGHT CHARGES							0.00	945.00	0.00	18.00	170.10	0.00	945.00
TOTAL															9870.00



Stock No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature
 M. Suman, Secy
 04/11/23
 01

CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	Total Items :-	Total Qty :-	DIS AMT.	IGST PAYABLE	PAYABLE	Round off	CR/DR NOTE
IGST 5.00%	8925.00	0.00	0.00	446.25	446.25	2	15	0.00	616.35	0.00		
IGST 12.00%	0.00	0.00	0.00	0.00	0.00			0.00				
IGST 18.00%	945.00	0.00	0.00	170.10	170.10			-0.35				
IGST 28 %	0.00	0.00	0.00	0.00	0.00			0.00				
TOTAL	9870.00	0.00	0.00	616.35	616.35			0.00	616.35	0.00	0.00	0.00

FOR ANIL PHARMA

Authorised Signatory

Grand Total

10486.00

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.

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