



ANIL PHARMA

C-58, RAJAN BABU ROAD,
 ADARSH NAGAR, DELHI - 110033
 Phone : 011-41557131, 9212300328
 DL.No. : 20B-137393 \ 21B-137394
 GSTIN : 07AAPP6291A1ZR
 E-Mail : anilpharma1997@gmail.com

GST INVOICE

Invoice No	A000599	Bill No.	
Invoice Date	03-08-2023	L.R. Date	03-08-2023
P.O. No.	23188	Cases	0
P.O. Date	05-07-2023	Due Date	01-12-2023
Transport :-			
E-WAY BILL NO. :-			
VEHICLE NO. :-			
STATION :-	09-UTTAR PRADESH		

Original for Buyer

BILL TO :
 DCC DISTRICT HOSPITAL LAKHIMPUR KHIRI
 DISTRICT HOSPITAL LAKHIMPUR KHIRI
 NEAR T.W WARD HOSPITAL ROAD, POLICE STATE
 LINE, LAKHIMPUR, UTTAR PRADESH-262701
 PHONE : 6393323652

SHIPPED TO
 Name :- DISTRICT HOSPITAL
 Address:- DIALYSIS UNIT, DISTRICT HOSPITAL
 NEAR T.B WARD HOSPITAL RD, POLICE LINE
 LAKHIMPUR, UTTAR PRADESH - 262701
 NUMBER :- 6393323652

S.N	HSN	Product Name	Pack	Qty	Free	Batch	Mfg	Exp	M.R.P	Rate	Dis	IGST	Value	Value	Amount	
1	3005	MICROPORE 3"		64		2307083	6/26		0.00	75.00	0.00	12.00	576.00	0.00	0.00	4800.00
2	996512	ADD FREIGHT CHARGES							0.00	250.00	0.00	18.00	45.00	0.00	0.00	250.00
TOTAL															5050.00	

Stock/No. of Boxes Received 61
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature
 M. No.

Total Items :- 2
 Total Qty :- 64

TOTAL	5050.00
DIS AMT.	0.00
IGST PAYABLE	621.00
PAYABLE	0.00
Round off	0.00
CR/DR NOTE	0.00

OUR BANK DETAILS AS :-
 Bank Name : UJJIVAN 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.

Authorised Signatory

5671.00

Grand Total