

Inter Branch Purchase Invoice

Hospimax Healthcare Pvt Ltd

Address : 109, First Floor, DDA Building No. 5 District Centre, Janakpuri , New Delhi-110058, New Delhi, Central, South West and South, Delhi, India
Ph.No. : +91-1147481000
Email : formulations@healthcare.com
Website : www.pharmaceuticals.com
State Code/State : 07/Delhi
GST No. : 07AACCH1989G1ZF
PAN No. : AACCH1989G

Supplier Address	: Aark Pharmaceuticals Unit-2 : SCO No. 180, Ground Floor & Half Basement, Sector 38 C&D, Noida-201301, Gautam Buddha Nagar	Invoice Number	: HH/02/26/IBP0000004
Pin Code	: 201301	Invoice Date	: 11-02-2026
State	: Uttar Pradesh	Bill Number	: CO/09/25/IBS0000001
Country	: India	Bill Date	: 02-09-2025
Phone	:		
GSTIN/UIN	: 09ASDHG1232F1ZZ		

S.NO.	Goods Description	UOM	HSN/SAC	Pack Size	Quantity	Rate	Amount
1	Amino acid 7% Inj. 250ml Bottle	BTL	30049099		15.00	165.00	2475.00
2	CEPTIMMUN-S 720	STP	30049099		30.00	170.00	5100.00
							Sub-Total 7575.00
							IGST 12% 909.00
							Packing Charges 800.00
							IGST 18% 144.00
							Grand Total 9428.00

Amount in Words:

INR Nine Thousand Four Hundred Twenty Eight only

Remarks

This is computer generated document.

For Hospimax Healthcare Pvt Ltd
Authorised Signatory