

MANKIND PHARMA LTD.
 SHOP NO 5, PLOT NO 6 LOCAL SHOPPING CENTRE,
 CHELTAN COMPLEX SHRESTHA VIHAR, DELHI 110092 State
 Code:07 State Name: Delhi

Bill to Address : (1041877)
JOLLY ENTERPRISES
 B-116, 1st FLOOR POCKET B OKHLA PHASE 1, OKHLA,
 SOUTH DELHI, DELHI OKHLA PHASE-1 110020
 Mob- Tel:9911022259- 9911422285

ORIGINAL

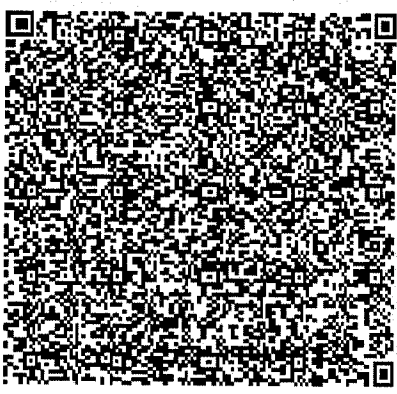
Ship to Address : (1041877)
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TAX INVOICE (Gravitas Mankind)
 Invoice No : 290821092
 Inv. Date : 05.03.2022
 Order No. : 1011137583
 GR/PR No. :
 GR/PR Date :
 No of cases :
 Weight in Kgs :
 Party Ref No. :
 Rev.-Charge :
 No Dist.Chnl. 01

Location : 1508
 Phone : 011-43091170
 GST No : 07AAACM9401C1ZK
 Fax No :
 D.L. No1 : 20B-135353
 D.L. No2 : 21B-135354,
 Food Lic. No. : 1331801100041

DELIVERY AT : OKHLA PHASE-1
 GST No : 07BDDPP4129A1ZY
 PAN : BDDPP4129A
 D.L. No. 1 : 20B-DL-OKH-119352
 D.L. No. 2 : 21B-DL-OKH-119353
 STATE NAME : Delhi
 Goods Through :
 Place of supply : OKHLA PHASE-1
 State Code : 07

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Material HSN Code	Material Description	Pack	C	Mfg Name/ Batch	Mfg Date/ Exp Date	Mfg date/ use Before	MRP	P.T.R	P.T.S	QTY	Amount	Disc.Amt/ Disc.%	Amount/ CGST%	Amount/ SGST%	Amount/ IGST%	Net Amount
50002121	CLARINOVA-250 TABLETS	6 TAB	N	MEDIFORCE HEALTHCARE PVT. B3AFU08	JUN-21 MAY-23		104.46	74.61	67.15	12	805.8	0	48.35	48.35	0.00	805.8
30042063	CLARINOVA-500 TABLETS	6 TAB	N	MEDIFORCE HEALTHCARE PVT. B3AFU08	JUN-21 MAY-23		196.63	140.45	126.41	24	3033.84	0	182.03	182.03	0.00	3033.84
50002164	D3 MUST 2K TABLETS	10 TAB	D	J.K. PRINT PACKS (PHARMA D) MHPU008	NOV-21 OCT-23		53.36	38.11	34.30	12	411.6	0	24.70	24.70	0.00	411.6
50002177	D3 MUST DROPS	15 ML	N	SIRMOUR REMEDIES PVT. LTD. 23ALLU061	DEC-21 NOV-23		39.48	28.20	25.38	40	1015.2	0	60.91	60.91	0.00	1015.2
50002909	D3 MUST FORTE DROPS	15 ML	D	Tripart Medicare Limited BCCWU017	OCT-21 MAR-23		80.00	57.14	51.43	20	1028.6	0	61.72	61.72	0.00	1028.6
30045036	LIZOFORCE-600	4 TAB	N	Helios Tabs Limited (Unit- B3BPV006	JAN-22 DEC-23		143.38	102.41	92.17	12	1106.04	184.34	55.30	55.30	0.00	921.7
50000407	MAHAGABA M-75	10 CAP	D	MANKIND PHARMA LTD. - UNIT 98ABU006	SEP-21 AUG-23		129.00	92.14	82.93	12	995.16	0	59.71	59.71	0.00	995.16
Total											8396.24	184.34	492.72	492.72	0	8211.90

Handwritten signature/initials

For Pymt thru :
 DD/Cheq should be made in favour of MANKIND PHARMA LTD. Payable At New Delhi.
 Online mode: Virtual A/C "" should be used. Bank Name: "" IFSC Code: "" Account Type: ""
 Payment not released before due date of this invoice will incur Interest 14 % p.a. Any Payment /Stockissue to any person under whatsoever
 Context/reason without the permission of the Co. is not bound on us.
 GOODS SUPPLIED AGAINST THIS INVOICE DO NOT CONTRAVENE THE PROVISION OF SECTION 18 OF THE DRUG AND COSMETIC ACT 1940.
 DUE DATE: 15.03.2022 CHECKUE No. :

Total	0.00	8211.90
Add CGST 6 % on	8211.90	492.72
Add SGST 6 % on	8211.90	492.72
Add TCS 0.1 % on	9197.34	9.19
Net Invoice Amt.	0.00	9206.53
Less Cr. NI *	0.00	0.00
Add Debit NI +	0.00	0.00

For payment through UPI mode, kindly visit : WWW.AIOCDAWACS.COM

Add Rounding Off	0.00	0.47
Net Payable Amt	0.00	9207.00
	0.00	0.00

Amount in Words : NINE THOUSAND TWO HUNDRED SEVEN RUPEES ONLY

CRN:

DBN :

Prepared By

Checked by

For MANKIND PHARMA LTD.
Authorised Signatory

All Claims are subject to NEW DELHI Jurisdiction.
Mankind Pharma Ltd, CIN No - U74899DL1997PLC044843, PAN-AAACM9401C, Regd Off : 208, Okhla Industrial Estate, Phase-3, NEW DELHI, (110020), Ph. 011-46541111, Fax-011-46541382, contact@mankindpharma.com, www.mankindpharma.com