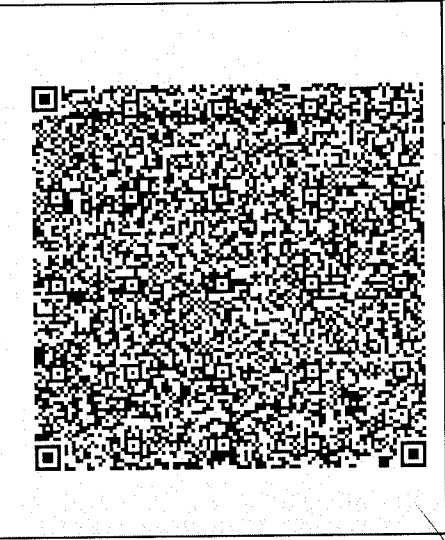


MANKIND PHARMA LTD.
 SHOP NO 5, PLOT NO 6 LOCAL SHOPPING CENTRE,
 CHETAN COMPLEXSHRESTHA VIHAR, DELHI 110092, State
 Code:07 State Name: Delhi

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

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

TAX INVOICE (Zesteva)
 Invoice No : 290824176
 Inv. Date : 24.03.2022
 Order No. : 1011237732
 GR/PR No. :
 No of cases :
 Weight in Kgs :
 Party Ref No. :
 Rev.-Charge :
 No Dist.Chnl. 01



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

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

Location : 1508
 Phone : 011-43091170
 Fax No : 07AAACM9401C1ZX
 D.L. No1 : 20B- 135353
 D.L. No2 : 21B- 135354,
 Food Lic. No. : 1331801100041
 IRN NO : 0f6b0a51ed2eff51def3fe15f37d73463469c780f357ff04a58f11
 eaf934967

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
50001383 30049099	VOMILAST	10 TAB	D	CRIS PHARMA (INDIA) LTD. E2BEU023	NOV-21 OCT-23		55.00	39.29	35.36	10	353.6	10.00	6.00	19.09	6.00	318.24
Total											353.6	19.09	19.09	0	318.24	

Total		0.00	318.24	19.09	318.24
Add CGST 6 % on		318.24			19.09
Add SGST 6 % on		318.24			19.09
Add TCS 0.1 % on		356.42			0.36
Net Invoice Amt.		0.00			356.78
Less Cr. Nt +		0.00			357.00
Add Debit Nt +		0.00			0.00
Add Rounding Off		0.00			0.22
Net Payable Amt.		0.00			0.00

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 THISINVOICE DO NOT CONTRAVENE THE PROVISION OF SECTION 18 OF THE DRUG ANDCOSMETIC ACT 1940.
 DUE DATE: 03.04.2022 CHEQUE No. :
 For payment through UPI mode, kindly visit : WWW.AIOCDAWACS.COM

Amount in Words : NIL Only
 CRN:0836099862
 DBN :
 Prepared By :
 Checked by :
 For MANKIND PHARMA LTD.
 Authorised Signatory
 All Claims are subject to NEW DELHI Jurisdiction.
 Mankind Pharma Ltd., CIN No.- U74899DL1991PLC044843, 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