

INDIAN PHARMACOPOEIA COMMISSION

MINISTRY OF HEALTH & FAMILY WELFARE, GOVERNMENT OF INDIA

SECTOR-23, RAJ NAGAR, GHAZIABAD- 201 002,

Tel No: 0120- 2783392, 2783400, 2783401; Fax: 2783311

(Publication Division)

PAN No.: AAATI7017F

GSTIN 09AAATI7017F2ZR

PROFORMA INVOICE

S/N	TITLE OF IPC PUBLICATION	UNIT PRICE	QUANTITY	DISCOUNT %	GST@5%	NET PRICE
1.	National Formulary of India (NFI) 2021	INR 660/-	01 Copy	-NIL-	-NIL-	INR 660/-
2.	Addendum 2021 to Indian Pharmacopoeia 2018	INR 7000/-	01 Copy	-NIL-	-NIL-	INR 7000/-
3.	Reference Manual for Medical Devices 2020	INR 4000/-	01 Copy	-NIL-	-NIL-	INR 4000/-
4.	Addendum 2019 to Indian Pharmacopoeia 2018	INR 7000/-	01 Copy	-NIL-	-NIL-	INR 7000/-
5.	Indian Pharmacopoeia-2018 (4 Volumes Set) along with DVD	INR 50000/-	01Set (along with DVD)	-NIL-	INR 2500/-	INR 52500/-
6.	DVD of Indian Pharmacopoeia-2018	INR 30000/-	01 Copy	-NIL-	INR 1500/-	INR 31500/-
7.	Indian Pharmacopoeia-2014 (4 Volumes Set)	INR 25000/-	01Set (along with DVD)	-NIL-	INR 1250/-	INR 26250/-
8.	Addendum 2015 to Indian Pharmacopoeia-2014	INR 5000/-	01 Copy (along with DVD)	-NIL-	INR 250/-	INR 5250/-
9.	Addendum 2016 to Indian Pharmacopoeia-2014	INR 5000/-	01 Copy	-NIL-	INR 250/-	INR 5250/-
10.	National Formulary of India (NFI) – 2016	INR 600/-	01 Copy	-NIL-	INR 30/-	INR 630/-
11.	Guidance Manual for Monographs Development of Herbs & Herbal Products Including Phytopharmaceuticals Drugs (Edition 2)	INR 500/-	01 Copy	-NIL-	-NIL-	INR 500/-
12.	Guidance Manual for Compliance of Indian Pharmacopoeia (IP)	INR 300/-	01 Copy	-NIL-	-NIL-	INR 300/-

MODE OF PAYMENT: (The payment can be make either through Demand Draft or NEFT/RTGS):

Through Demand Draft (DD):

The payment can be make through Demand Draft drawn in favour of “**Indian Pharmacopoeia Commission**“ payable at **Ghaziabad (Uttar Pradesh)**.

Through NEFT/RTGS: (The payment can be transfer to the below mentioned account):

A/c Holder Name: Indian Pharmacopoeia Commission
ACCOUNT NO.: 21860100013540
BANK NAME: BANK OF BARODA
BRANCH NAME: Sanjay Nagar, Ghaziabad, Uttar Pradesh, India
IFSC CODE: BARB0SANGHA (0 → Denoting Zero)
SWIFT CODE: BARBINBBGHA

Note: Kindly inform us at our e-mail ID: sales-ipc@gov.in after money transaction along with **GSTIN No. (if registered)**, **UTR No.** and **complete postal address** for further necessary action. For more information and update, please visit our website www.ipc.gov.in

SUPPLY ORDER FORM

INDIAN PHARMACOPOEIA COMMISSION MINISTRY OF HEALTH & FAMILY WELFARE, GOVERNMENT OF INDIA SECTOR-23, RAJ NAGAR, GHAZIABAD- 201 002 Tel No: 0120- 2783392, 2783400, 2783401; Fax: 2783311 Mail: sales-ipc@gov.in Web: www.ipc.gov.in PAN No.: AAATI7017F GSTIN 09AAATI7017F2ZR	For Office use only: Date Received:..... Order No.:..... Processed by:.....
---	---

Please Supply (Order must be made in writing by post or fax or e-mail on address as given)

Sr. No.	Title of the Publication(s)	No. of Set(s)/ Copy(ies) Ordered	Amount @ per copy/set	GST as applicable	Total Amount (Rs.)

Name (please type full name):

Name of the Organization:

Delivery Address:

.....Pin Code:.....

Tel. No.:..... E-Mail:.....

GSTIN.....State Code:.....

MODE OF PAYMENT: (The payment can be make either through Demand Draft or NEFT/RTGS):

The payment shall be made either by **Demand Draft** drawn in favour of “**INDIAN PHARMACOPOEIA COMMISSION**“ payable at **Ghaziabad (Uttar Pradesh)** or through NEFT/RTGS to below mention account:-

A/c Holder Name: Indian Pharmacopoeia Commission
ACCOUNT NO.: 21860100013540
ACCOUNT TYPE: Saving
BANK NAME: BANK OF BARODA
BRANCH NAME: Sanjay Nagar, Ghaziabad, Uttar Pradesh, India
IFSC CODE: BARB0SANGHA (0 → Denoting Zero)

Demand Draft/UTR No......**Date:**..... **Bank Name:**.....

Note: Kindly inform us at our e-mail ID: sales-ipc@gov.in after money transaction along with **UTR No.** for further necessary action.

Declaration:

I certify that the book(s) ordered is for the purpose in connection with my trade, business or profession.

Signature: Date:

We regret that order is not normally accepted over the telephone