Details of Supplier

BILL FORM

Details of Receiver
D.C.D.C District
Hospital Mobile No.
Sidharth. nagar.

No. :
Date : 20/5/24
Receiver GSTIN

Quantity	Description of Product/Services	HSN Code	Rate	Amount Rs.	P.
1	Acid 2 /Litter 5 Bottel		70	350	
2	Harpic	1	120	120/-	
3	Fenail 5 lotter 2 Can	2	300/-	600/-	
4	wiper.	1	160/-	160/-	
5	Broom	1	80	80/-	
			TOTAL	1310/-	

Thank You
Sangam
E. & O. E.

- Goods once sold will not be taken back.
- Interest @18% P.A. will be charged if it is not paid presentation.

SIGNATURE