Details of Supplier

Bill Form

State____________ Satet Code_____

Details of Receiver

Dr Dc Kidney Care

State____________ Satet Code_____

No.

Date 30/4/24

Receiver GSTIN

Qty.	Description of Product	HSN Code	Rate	Value of Supply ₹	P.
225	Tea		10/-	2250	—

Mayank

Thank You ! E.&O.E.

TOTAL 2250

Ansh™

☑ Goods once sold will not be taken back.

☑ Interest @ 18% P.A. will be charged if it is not paid on presentation.

Signature