

GSTIN : 07ABAFG6573H1ZA

Original Copy

TAX INVOICE

**GENCARE GLOBAL**

GROUND FLOOR, Flat no.: B-542, Baal Krishan Thapar Marg, Near Sudershan Park New Delhi 110015

Tel. : 9625232705 email : gencareglobe@gmail.com

Invoice No. : 496/2024-25	Vehicle No. :
Dated : 07-05-2024	Station :
Place of Supply : Delhi (07)	E-Way Bill No. :
Reverse Charge : N	P.O NO. : 144-052024-26031
GR/RR No. :	P.O DATE : 03-05-2024
Transport :	

<b>Billed to :</b> DCDC Health Services Private Limited C-185, First Floor Rewari Line Industrial Area Mayapuri, Phase-II, Delhi, 110064	<b>Shipped to :</b> DCDC Health Services Private Limited CHC-NARASAMPET GOVT HOSPITAL NARSAMPET NEAR POLICE STATION DIST-WARANGAL-506132 Party Mobile No : 9502696731 GSTIN / UIN : 07AAFCD0204K1Z1
Party Mobile No :	
GSTIN / UIN : 07AAFCD0204K1Z1	

S.N.	Description of Goods	HSN/SAC Code	Qty.	Unit	List Price	Discount	Price	Amount( )
1.	BLUE GARBAGE BAG (BIG)	39232100	30.00	Pcs.	120.00	0.00 %	120.00	3,600.00
2.	RED GARBAGE BAG (BIG)	39232100	30.00	Pcs.	120.00	0.00 %	120.00	3,600.00
3.	EXAM GLOVES MEDIUM 500 GMS	40151100	20.00	Pcs.	210.00	0.00 %	210.00	4,200.00
								<b>11,400.00</b>
Add : CGST @ 9.00 %								648.00
Add : SGST @ 9.00 %								648.00
Add : CGST @ 6.00 %								252.00
Add : SGST @ 6.00 %								252.00
<b>Grand Total 80.00 Pcs.</b>								<b>13,200.00</b>

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
39232100	18%	7,200.00	648.00	648.00	1,296.00
40151100	12%	4,200.00	252.00	252.00	504.00
<b>Total</b>		<b>11,400.00</b>	<b>900.00</b>	<b>900.00</b>	<b>1,800.00</b>

**Rupees Thirteen Thousand Two Hundred Only**

**Bank Details :** HDFC BANK BRANCH : MOTI NAGAR  
A/C NO.: 50200091740082 IFSC CODE : HDFC0004396

<b>Terms &amp; Conditions</b> E.&O.E. 1. Goods once sold will not be taken back. 2. Interest @ 18% p.a. will be charged if the payment is not made with in the stipulated time. 3. Subject to 'Delhi' Jurisdiction only.	Receiver's Signature :
	Stock/No. of Boxes Received ..... <b>3 Box</b> ..... For GENCARE GLOBAL Subject to Physical Check Name/Employee Code ..... <b>Kidwai</b> ..... Centre Name ..... <b>Narasampet</b> ..... Date/Time ..... <b>10:50pm 03/06/2024</b> ..... Signature ..... <b>[Signature]</b> ..... M. No. <b>9502696731</b> ..... Authorised Signatory