

**Poly Medicare Limited**  
PLOT NO. 33-34, Sector 68, IMT  
Faridabad Haryana, India ,121004  
Phones: 01293355070 Fax: N/A  
Email: plant@polymedicure.com  
Mfg Drug License No.:MFG/MD/2018/000032, MFG/MD/2020/000183  
Whole sale Drug License No : RLF21B2023HR000464/20B2023HR000470



PAN No.: AAACP3891P CIN No.: L40300DL1995PLC066923  
GSTIN : 06AAACP3891P1ZV State Code : 06 - Haryana

Customer Purchase Order No./Date: SHOW BELOW ↓

**Invoice No & Date : 2415110934 / 30.10.2024**

**Name & Address of Customer/Bill to 1102593**  
M/s. DCDC Health Services Pvt. Ltd.  
C-185, 1st Floor, Mayapuri Industrial Area, Phase-II, New Delhi 110064 , Delhi (India)  
TEL No. 01145581006 , 8506005916 Email: scm@dcdc.co.in  
Drug Lic:N/A 31.12.9999  
GSTIN:07AAFCD0204K1Z1 PAN:AAFCD0204K

**Consignee/Ship To 1500442**  
M/s. DCDC Health Service Pvt. Ltd  
District Hospital Sultanpur Sultanpur, Faizabad - Sultanpur Rd, Majorganj, Majganj Sultanpur 228001 , Uttar Pradesh ( India )  
TEL No. 7905804581 , Email:  
Drug Lic:N/A 31.12.9999  
GSTIN: PAN:  
State Code: 09 - Uttar Pradesh

Payment Terms: Payment Due in 120 Days  
Delivery Terms: FOR Delhi  
Sales Order : SHOW BELOW ↓  
Del. No . SHOW BELOW ↓  
Payment Method : Normal Sales

Place of Supply : 07 - Delhi  
Date of Issue of Invoice : 30.10.2024  
Mode of Tpt & Vehicle No.: BY ROAD /  
Transporter : GATI EXPRESS & SUPPLY CHAIN

Bank Detail: STATE BANK OF INDIA  
SME BRANCH, FARIDABAD  
A/C NO. 10410101725  
IFSC CODE# - SBIN0009950

G.R/L.R. No./ Date: 315405747

Scan & Pay Using Any UPI App to UPI ID : polymed@sbi

IRN : a93f819a5a16a184c5b21cbbd44ba5e7a60c9d022ca4cbf2a94eb3c7e62a8827

| S.No   | Description of Goods   | HSN Code | No. of Pkg | Quantity NO (s) | Rate/Unit INR | Taxable Value                           | IGST Rate(%) | IGST Amount      |
|--|--|----------|------------|-----------------|---------------|---|--------------|------------------|
| 1  | HAEMOFLUX MFP 140 ME PC PML-D<br>B/No.8538024L[Mfg:2024-10,Exp:2027-09]56, | 90189031 | 2          | 56.00           | 252.5000      | 14,140.00                               | 5            | 707.00           |
| <b>TOTAL</b>   |  |          | <b>2</b>   | <b>56.00</b>    |               | <b>14,140.00</b>                        |              | <b>707.00</b>    |
| Taxable Value  |  |          |            |                 |               | <b>14,140.00</b>                        |              |                  |
| IGST:( INR ) Rupees Seven Hundred Seven Only   |  |          |            |                 |               | 707.00                                  |              |                  |
|  |  |          |            |                 |               | IGST TCS @0.1% 14.8                     |              |                  |
|  |  |          |            |                 |               | Rounding Off 0.1                        |              |                  |
| Grand Total (In INR in Words): Rupees Fourteen Thousand Eight Hundred Sixty Two Only |  |          |            |                 |               | <b>Grand Total For Customer ( INR )</b> |              | <b>14,862.00</b> |

**Remarks: Whether tax is payable on reverse charge: NO**  
PO No.: 59-102024-27771 email dt, 04.10.24/00.00.0000  
Sale Order No.: 1010249737/09.10.2024  
Del No.: 8110248434/30.10.24

Certified that the Particulars stated above are true and correct and the price indicated represents the price actually charged and there is no flow of additional consideration directly or indirectly from the buyer.  
**Terms & Conditions**  
1. Interest @ 15% will be charged if payments are made after the due date.  
2. GST will be applicable on Interest& Penalty for delayed payment.  
3. Goods are insured under Marine Cargo open Policy.  
4. Goods once sold will not be taken back.  
5. All disputes are subject to Faridabad jurisdiction only.

IRN : a93f819a5a16a184c5b21cbbd44ba5e7a60c9d022ca4cbf2a94eb3c7e62a8827

Stock/No. of Boxes Received 2 Box.....  
Subject to Physical Check  
Name/Employee Code Shikha DCO1952  
Centre Name Sultanpur  
Date/Time 9/11/24 11:30 AM  
Signature [Signature] M. No. 7355319472

3949

Prepared By **Jagdish** Checked By **[Signature]** For Poly Medicare Limited  
Authorised Signatory

Regd Office: 232B, 3rd FLOOR, OKHLA INDUSTRIAL ESTATE PHASE - III, NEW DELHI - 110020, INDIA  
Phones: 011-26321838,33550700 Fax:26321894/39 Email: customercare@polymedicure.com, info@polymedicure.com Website: www.polymedicure.com