

GST INVOICE

SHREE BHAGYAVANTI PHARMA & SURGICAL DISTRIBUTOR
 SHOP NO 74 NEAR VISHWI SHAWARAYYA CIRCLE
 OPP INDIRA CANTEN BAGALKOT ROAD VIJAYAPUR

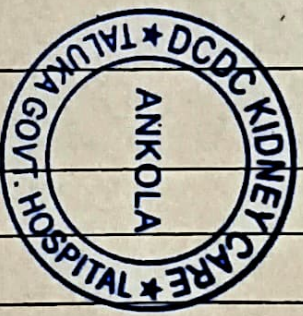
Phone: 8123110594
 DL No: KA.BJ-208-218-10292274
 GSTIN: 29AEDF98540124

DCDC HEALTH SERVICE PVT
 GOVT HOSPITAL DIGALYSIS UNIT NEAR POLICE STAT
 ION ANKOLA
 29-KARNATAKA
 PHONE: 8105942976

DUPLICATE
 DUE DATE: 18-06-2024

Inv No: A000346
 Inv Date: 18-06-2024
 Transport: _____
 Mobile no: _____
 L.R. NO: 18-06-2024
 L.R. DI: _____
 No of BOXS: 0
 PO NO.: 161-062024-26252
 PO DATE: 04-08-2024

Sl. No	MRK	Qty	Particulars	Batch	Exp	HSN Code	M.R.P	Rate	Dis %	SGST	Value	CGS	Value	Amount
1	ABAR	500	15004 ABARIS NS	D124002037	3/27	30045020	34.83	21.50	0.0	6.00	645.00	6.00	645.00	12040.00



Stock/No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature

20 Box
De 035579
8/18/2024
 M. No 8194199737

CLASS	SUB TOTAL	SCHEME	DISCOUNT	SGST	CGST	TOTAL GST	SUB TOTAL
TOTAL ITEMS: 11	TOTAL QTY: 500.000						
GST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GST 12.00%	10750.00	0.00	0.00	645.00	645.00	1290.00	645.00
GST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00	645.00
GST 28.00%	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CUR TOTAL	10750.00		0.00	645.00	645.00	1290.00	12040.00

Rs Twelve Thousand Four Only

FOR SHREE BHAGYAVANTI PHARMA & SURGICAL DISTRIBUTOR

Terms & Conditions
 Goods once sold will not be taken back or exchanged.
 Bills not paid due date will attract 24% interest.
 All disputes subject to Jurisdiction only.
 BANK DETAILS: BANK NAME: KOTAK BANK
 A/C : 8123110594 IFSC : KKBK0008234

Authorised signatory

SHREE BHAGYAVANTI PHARMA & SURGICAL DISTRIBUTOR
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 OPP INDIRA CANTEN BAGALKOT ROAD VIJAYAPUR
 ROAD VIJAYAPUR
 DCDC HEALTH SERVICE PVT
 GOVT HOSPITAL DIGALYSIS UNIT
 ION ANKOLA
 PHONE: 8105942976
 Inv No: A000346
 Inv Date: 18-06-2024

SUB TOTAL	DISCOUNT	SGST PAYABLE	CGST PAYABLE	CRDR NOTE	GRAND TOTAL
10750.00	0.00	645.00	645.00	0.00	12040.00

SEAL AND SIGNATORY