

TAX INVOICE

9342557950

SANDILYA MEDY INC
 1-10-124, Road No: 8F,
 Dwarakapuram, Disukhnagar
 Hyderabad.
 DL NO: 20B&21B/TS/RR/2022-97432
 GSTIN/UIN: 36AETFS0566G12T
 State Name : Telangana, Code : 36
 Contact : 9849930132
 E-Mail : sandilyamedyinc@gmail.com

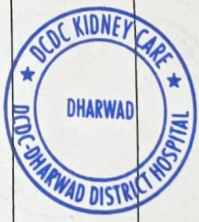
Invoice No. SMI/23/082	Dated 1-Feb-24
Delivery Note	Mode/Terms of Payment
Reference No. & Date.	Other References
Buyer's Order No. 167-012024-24986	Dated 24-Jan-24
Dispatch Doc No.	Delivery Note Date
Dispatched through VRL LOGISTICS	Destination DHARWAD
Terms of Delivery	

Consignee (Ship to)
DCDC HEALTH SERVICES PRIVATE LIMITED
 DH DHARWAD
 DHARWAD DISTRICT HOSPITAL
 DIALYSIS UNIT, ROOM NO.52
 KILLA ROAD, DHARWAD - 580001
 PH.NO: 9986980020
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Karnataka, Code : 29

Buyer (Bill to)
DCDC HEALTH SERVICES PRIVATE LIMITED
 First Floor, C-185
 Mayapuri Industrial Area Phase-2
 Mayapuri, New Delhi
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

No. & Kind of Pkgs.	Description of Goods	HSN/SAC	GST Rate	MRP/Marginal	Quantity	Rate	per	Disc. %	Amount
80	AQUALIVE NS 500ML Batch: (N) 176 Expiry: 30-Sep-25 Batch: (N) 181 Expiry: 30-Sep-25	30049099	12 %	39.00/BOX	2,000 BOTTLES (80 BOX) 750 BOTTLES (30 BOX) 1,250 BOTTLES (50 BOX)	23.00	BOTTLES		46,000.00
1	NS 100ML (IHL) Batch: 3C40212 Expiry: 30-Nov-26	30049099	12 %	22.00/BOTTLES	100 BOTTLES (1 BOX) 100 BOTTLES (1 BOX)	11.00	BOTTLES		1,100.00
2	D 25% 100ML(REALCADE) Batch: VA3080011 Expiry: 31-May-24	30049099	12 %	21.28/BOTTLES	200 BOTTLES (2 BOX) 200 BOTTLES (2 BOX)	14.00	BOTTLES		2,800.00
IGST @12%									49,900.00
									5,988.00

Stock/No. of Boxes Received **83**
 Subject to Physical Check
 Name/Employee Code **Jyothi.C.Mulim (S.D.Tech)**
 Centre Name **Dharwad**
 Date/Time **01/02/2024**
 Signature **[Signature]** M. No. **7899464460.**



Amount Chargeable (in words) Total 2,300 BOTTLES ₹ **55,888.00**
INR Fifty Five Thousand Eight Hundred Eighty Eight Only E. & O.E

Taxable Value	Rate	Integrated Tax Amount	Total Tax Amount
49,900.00	12%	5,988.00	5,988.00
Total: 49,900.00		5,988.00	5,988.00

Tax Amount (in words) : **INR Five Thousand Nine Hundred Eighty Eight Only**

Remarks:
 BEING SALE FOR THE INVOICE NO SMI/23/082 DELIVERY AT DHARWAD DISTRICT HOSPITAL, DHARWAD.
 Declaration
 1. Goods once sold cannot be taken back.
 2. All Claims and disputes are subject to Rangareddy Jurisdiction only.

Company's Bank Details
 A/c Holder's Name : **SANDILYA MEDY INC**
 Bank Name : **HDFC Bank**
 A/c No. : **50200072960721**
 Branch & IFS Code : **MOOSARAMBAGH & HDFC0004326**

SANDILYA MEDY INC
 HYDERABAD
 for SANDILYA MEDY INC
 [Signature]

SUBJECT TO HYDERABAD JURISDICTION
 This is a Computer Generated Invoice

83 of 1200
 [Handwritten signatures]

[Handwritten signatures]