

**Poly Medica Limited**



Plot No. 33/34, Sector 68, IIT  
Faridabad, Haryana, India - 121004  
Phone: 01145581006, Fax: N/A  
Email: [info@polymedicare.com](mailto:info@polymedicare.com)  
Drug License No: MFG/MD/2018/000032, MFG/MD/2020/000183  
Retail Sale Drug License No: RLF21B2024HR000464, 20B2024HR000470

PAN No: AAACP3891P      CIN No: LA0300DL1995PLC066923  
GSTIN: 06AAACP3891P1ZV      State Code: 06 - Haryana

Customer Purchase Order No. Date: SHOW BELOW ↓

**Invoice No & Date : 2415110368 / 25.10.2024**

**Name & Address of Customer/Bill to**

**Consignee/Ship To**  
M/s DCDC Health Service Pvt Ltd.  
District Hospital Mathura Maharishi Dayanand Saraswati Dialysis Unit, Civil  
Lines, Choubey Para, Mathura 281001, Uttar Pradesh (India)  
TEL No 8208249889, Email  
Drug Lic/N/A 31 12 9999  
GSTIN: PAN:  
State Code: 09 - Uttar Pradesh

M/s DCDC Health Services Pvt Ltd  
155, 1st Floor, Mayapuri Industrial Area, Phase-II, New Delhi 110064, Delhi (India)  
Tel No: 01145581006, 8506005916 Email: [sem.a@dcdc.co.in](mailto:sem.a@dcdc.co.in)  
Drug Lic N/A 31 12 9999  
GSTIN: 07AAAFCD0204K1Z1      PAN: AAFCDD0204K

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: 25.10.2024  
Mode of Tpt & Vehicle No.: BY ROAD /  
Transporter: CCF LOGISTICS SERVICES LLP

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

G/R/L R. No./ Date: 10062018

Scan & Pay Using Any UPI App to UPI ID: [polymed@sbi](mailto:polymed@sbi)

IRN: 8e2f773a38e265cc219ec95a8d56031b640519523882940a15a519d197bbf214

S.No	Description of Goods	HSN Code	No. of Pkg	Quantity NO (s)	Rate/Unit INR	Taxable Value	IGST Rate(%)	IGST Amount
1	HAEMOLINE - BLOOD LINE SET POST PUMP B No 6531624K   Mfg: 2024-09, Exp: 2029-08   320.	90183990	8	320.00	84.0000	26,880.00	12	3,225.60
<b>TOTAL</b>								<b>26,880.00</b>
						<b>Taxable Value</b>		<b>3,225.60</b>
						<b>IGST</b>	@0.1%	<b>30.11</b>
						<b>TCS</b>		<b>0.29</b>
						<b>Rounding Off</b>		<b>30,136.00</b>
						<b>Grand Total For Customer ( INR )</b>		<b>30,136.00</b>

IGST @ 12% INR / Rupees: Three Thousand Two Hundred Twenty Five And Sixty Paise Only  
Grand Total (In INR in Words): Rupees Thirty Thousand One Hundred Thirty Six Only

**Remarks: Whether tax is payable on reverse charge: NO**  
PO No: 51-102024-27878 email dt. 04.10.24 00.00.0000  
Sales Order No: 1010249760 09.10.2024  
Del No: 8110247309 25.10.24  
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**
- Interest @ 15% will be charged if payments are made after the due date
  - GST will be applicable on Interest & Penalty for delayed payment
  - Goods are insured under Marine Cargo open Policy
  - Goods once sold will not be taken back
  - All disputes are subject to Faridabad jurisdiction only

3012

Stock/No. of Boxes Received: 8 Boxes  
Subject to Physical Check  
Name/Employee Code: *[Signature]*  
Centre Name: *[Signature]*  
Date/Time: *[Signature]*  
Signature: *[Signature]*

**For Poly Medica Limited**  
Authorized Signatory

Prepared By: Chetan Kumar Chaudhary

Checked By: *[Signature]*

# Tax Invoice

(GST read with Rule 46)

Original for buyer



## Poly Medicare Limited

Plot No. 13-14 Sector 68, IIT  
Gurgaon, Haryana, India - 122004  
Phone: 01299-211111 FAX: N/A  
Email: info@polymedicare.com  
Reg. No. - UIN No. MFU-MD-2018-000032, MFU-MD-2020-000183  
Wholesale Drug License No. - RL271B21231HR00064 20B2024HR000470

PAN No AAACP3891P CIN No LA0100DL1995PLC066923  
GSTIN 06AAACP3891P1ZV State Code 06 - Haryana

Customer Purchase Order No. Date SHOW BELOW ↓

Invoice No & Date : 2415110368 / 25.10.2024

### Name & Address of Customer Bill to

M/s. AITN Health Services Pvt Ltd  
C-85 1st Floor, Mayapuri Industrial Area, Phase-II, New Delhi 110064, Delhi

### Consignee/Ship To

M/s. DCDC Health Service Pvt Ltd  
District Hospital Mathura Maharishi Dayanand Saraswati Dialysis Unit, Civil  
Lines, Choubey Para, Mathura 281001, Uttar Pradesh (India)

TEL No. 01145581006, 8506005916 Email: sem@dcdc.co.in  
Drug Lic N/A 31 12 0000  
GSTIN: AAACPD0204K1Z1 PAN AAACPD0204K

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: 25 10 2024  
Mode of Tpt & Vehicle No: BY ROAD /  
Transporter: CCF LOGISTICS SERVICES LLP

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

G R L R No / Date: 10062018

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

QR Code and Reference No: INR 642771438265cc219ec958d50b1b640519523882940a15a519d1976b0214

S.No	Description of Goods	HSN Code	No. of Pkg	Quantity NO (s)	Rate/Unit INR	Taxable Value	IGST Rate(%)	IGST Amount
1	HAEMOLINE - BLOOD LINE SET POST PUMP B.No.8531624K/Mfg.2024-09,Exp.2029-081320.	90183990	8	320.00	84.0000	26,880.00	12	3,225.60
<b>TOTAL</b>						<b>26,880.00</b>		<b>3,225.60</b>
Taxable Value						26,880.00		3,225.60
IGST								3,225.60
TCS								30.11
Rounding Off @0.1%								0.29
<b>Grand Total For Customer ( INR )</b>								<b>30,136.00</b>

Remarks: Whether tax is payable on reverse charge: NO

PO No: 51-102124-27878 email dt.04.10.24 00 00 0000

Order No: 2415110368/25.10.2024

Del No: 811024789251024

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

- Interest @ 1% will be charged if payments are made after the due date
- GST will be applicable on Interest & Penalty for delayed payment
- Goods are insured under Marine Cargo cover Policy
- Goods once sold will not be taken back
- All disputes are subject to Faridabad jurisdiction only

QR Code and Reference No: INR 642771438265cc219ec958d50b1b640519523882940a15a519d1976b0214

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Stock No. of Boxes Received: 8 Box  
Subject to Physical Check  
Name Employee Code: [Signature]  
Centre Name: [Signature]  
Date/Time: 24/10/24  
Signature: [Signature] M. No. 908080202

For Poly Medicare Limited

Prepared By: Chetan Kumar Chaudhary

Checked By: [Signature]

Authorised Signatory: [Signature]

Regd Office: 232B, 3rd FLOOR, OKHLA INDUSTRIAL ESTATE PHASE - III, NEW DELHI - 110020, INDIA

Phone: 01299-211111 Fax: 26321844 39 Email: customercare@polymedicare.com, info@polymedicare.com Website: www.polymedicare.com