Mob.: 9873672990

GSTIN : 07BCLPJ0532N1ZG

SHRI GANESH ENTERPRISES

146 F/F, GALI NO. 14, WEST AZAD NAGAR, EAST DELHI-110051

TAX INVOICE

White : Original For Receipient
Pink : Duplicate For Transporter
Yellow : Triplicate For Supplier

Reverse Charges : Yes / No

Invoice No. : JMDE/ 287

Invoice Date : 19.06.23

State : Delhi | State Code | 07

Transportation Name .....

GR No. PH.NO. 7505825717 ..... Date .....

Vehicle No. .....

Date of Supply .....

Place of Supply .....

Details of Buyer I Billed to :

Name : DCDC Health service Pvt Ltd.

Address : C-185, Mayapuri industrial Area Phase-2

GSTIN : 07AAPCD0204K1Z1

State : New Delhe ..... Code 110064

Details of Consignee I Shipped to :

Name : District Hospital prayagaraj Motilal Nehru Hospital (Colvin Hospital)

Address : 14, Doctor KN Katju Road, Nakasa : kotwa, Muirabad, prayagaraj

GSTIN : .....

State : prayagaraj ..... Code 211003

Sr. No.	DESCRIPTION OF GOODS	HSN CODE (GST)	Qty.	Rate	Disc. %	Amount
	Red Garbage big	3923	5	94		470
	Red Garbage small	3923	5	94		470
	Green Garbage big	3923	5	94		470
	Green Garbage small	3923	5	94		470
	Yellow Garbage big	3923	5	94		470
	Yellow Garbage small	3923	5	94		470
	Black Garbage big	3923	20	94		1880

al Invoice Value (in Words) 5546

onic Reference Number : .....

Freight / Packing & Forwarding	
Sub. Total	4700
Add. : CGST @ ....—....%	—
Add. : SGST @ ....—....%	—
Add. : IGST @ ....18....%	846
Invoice Value	5546

Stock/No. of Boxes Received .....
Subject to Physical Check
Name/Employee Code DC02418
Centre Name .....
Date 11-7-23
Signature ..... M. No. .....
E.& O.E.

Certified that the particulars given above true and co

For SHRI GANESH ENTERPRI

Terms & Condition : •

once sold will not be taken back.

utes are subject to delhi jurisdiction.

erest per annum will be charged if not paid on 45 days.

Common Seal

Authorised Signatory