

R.C. HEALTH CARE
 Pharmaceutical Distributors
 F7/31 SEC-11 PRATAP VIHAR GHAZIABAD
 OPP-LEELAWATI SCHOOL

Phone : 7838223890
 Licence No. : UP1420B000461/UP1421B000458
 GSTIN : 09AARFR8679M1ZU

GST INVOICE

CREDIT

Party Name :
DCDC HEALTH SERVICE PVT. LTD.
 C-185MAYAPURI INDUSTRIAL AREA PHASE 2 N.DELHI
 CENTER- CIVIL HOSPITAL GHAZIABAD
 09-UP
 PHONE : 8506002727

Invoice No	T0001906	Order No. Order Date	Cases	0
Invoice Date	26-12-2023	L.R. No.	Transport	
Due Date	26-12-2023	L.R. Date	26-12-2023	

S.	Qty.	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P	Rate	DIS	SGST	CGST	Amount	Net
1.	200	JEDU		NS 100ML FFS	1086	6/25	30049099	0.00	13.00	0.00	6.00	6.00	2600.00	2912.00
2.	480	SACH	1*24	NS 500ML	N1QC374	9/25	30049099	39.04	19.00	0.00	6.00	6.00	9120.00	10214.40

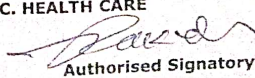
Stock/No. of Boxes received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature
 M. No. 2722

												TOTAL	11720.00
CLASS	TOTAL	SCHEME	DISCOUNT	SGST	CGST	TOTAL GST	Total Items :- 2		Total Qty :- 680		DIS AMT.		0.00
GST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00					SGST PAYBLE		703.20
GST 12.00%	11720.00	0.00	0.00	703.20	0.00	1406.40					CGST PAYBLE		703.20
GST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00					CR/DR NOTE		0.00
GST 28 %	0.00	0.00	0.00	0.00	0.00	0.00							
TOTAL	11720.00	0.00	0.00	703.20	0.00	1406.40							

Grand Total
13126.00

Rs. Thirteen Thousand One Hundred Twenty Six Only
 BANK NAME: PNB, A/c no. 3946002100007556, IFSC code: PUNB0394600

Terms & Conditions
 The rate of products is valid only for current Invoice.
 All disputes subject to GHAZIABAD Jurisdiction only.
 Late payment due date will attract 24% interest.

FOR R.C. HEALTH CARE

 Authorised Signatory