

Tax Invoice



**PINE PHARMA (P) LTD**  
 D-91/2 OKHLA INDUSTRIAL AREA  
 PHASE-1, NEW DELHI -110020  
 Ph 011-26810112, 26810114  
 Fax 011-41611894  
 D.L. No DL-TGB-124899(208) DL-TGB-124700(218)  
 Mfg. D.L. 1303  
 PAN No: AAACP1693F  
 GSTIN/UIN: 07AAACP1693F1Z1  
 State Name : Delhi, Code : 07  
 E-Mail : pinepharma@hotmail.com

Invoice No. <b>99/2024-25</b>	Dated <b>19-Apr-24</b>
Delivery Note	Mode/Terms of Payment
Reference No. & Date. <b>99/2024-25 dt. 19-Apr-24</b>	Other References
Buyer's Order No. <b>23-042024-25838</b>	Dated <b>5-Apr-24</b>
Dispatch Doc No.	Delivery Note Date
E-Way Bill No: <b>7214 2175 9767</b>	Destination <b>Civil JIND</b>
Dispatched through	Motor Vehicle No. <b>DL01LAL1895</b>
Bill of Lading/LR-RR No.	Terms of Delivery <b>59 Box</b>

Consignee (Ship to)  
**DCDC Health Services Pvt Ltd.**  
 Civil Hospital Jind, Gohana Road, Jind -  
 126102, Mo : 8295012840  
 State Name : Haryana, Code : 06

Buyer (Bill to)  
**DCDC Health Services Pvt Ltd.**  
 C-185, Mayapuri Industrial Area phase- 2,  
 Mayapuri, New Delhi-110064, CIN No. - U85190DL2014PTC265804  
 State Name : Delhi, Code : 07  
 Place of Supply : Delhi

SI No	Description of Goods	HSN/SAC	Alt. Quantity		Quantity		Rate	per	Disc. %	Amount
			Shipped	Billed	Shipped	Billed				
1	<b>Dry -Citrate 50 Lit Mix Part (A +B) With Dextrose</b> For Haemodialysis (1 Pkt PartA+2 Pkt PartB) Part A Batch No: DCD-2402 MfgExp: 04/24-2 Yr Part B Batch No: DCP-2401 MfgExp: 04/24-2 Yr Dextrose PKGSBoxX10 PktBatch No: CX-2401 04/24-2Y 25 Box + 25 Box +05 Box	30049099	25 Box	25 Box	50 Pkt	50 Pkt	875.00	Pkt		43,750.00
2	<b>Dry -Citrate HD Solution Part A+B 10 Lit Mix</b> With Dextrose (Potassium Free) Batch No: DCD-2329 Mfg & Exp 03/24-2 Yr 25or Part A +2 Box Part B Batch No: P-2401 04/24	30049099			20 Pkt	20 Pkt	175.00	Pkt		3,500.00
<b>CGST @12%</b>										47,250.00
<b>SGST @12%</b>										2,835.00
<b>6 %</b>										2,835.00
<b>6 %</b>										
<b>Total</b>										<b>₹ 52,920.00</b>

Stock/No. of Boxes Received ... 50 Pkt ...  
 Subject to Physical Check  
 Name/Employee Code ... Shubham ...  
 Centre Name ... DCDC Civil Hospital Jind ...  
 Date/Time ... 20/4/24 ...  
 Signature ... Shubham ... M. No. 8295012840

Amount Chargeable (in words) **Indian Rupees Fifty Two Thousand Nine Hundred Twenty Only** E. & O.E

Company's Bank Details  
 A/c Holder's Name : **PINE PHARMA (P) LTD**  
 Bank Name : **IDFC FIRST BANK**  
 A/C No. : **10043262598**  
 Branch & IFS Code : **OKHLA NEW DELHI & IDFB0020107**  
 SWIFT Code :

Declaration  
 We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Customer's Seal and Signature

for PINE PHARMA (P) LTD  
 Authorised Signatory

SUBJECT TO DELHI JURISDICTION  
 This is a Computer Generated Invoice