

Tax Invoice



Invoice No. INV-00000408	Dated 24-Jul-23
Delivery Note	Mode/Terms of Payment
Reference No. & Date.	Other References 107-072023-23129
Buyer's Order No. 100359	Dated 24-Jul-23
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Vessel/Flight No.	Place of receipt by shipper:
City/Port of Loading	City/Port of Discharge
Terms of Delivery	

Consignee (Ship to)
DCDC Health Service Pvt. Ltd. @
 DCDC Dialysis Center Kurukshetra, Government
 Polyclinic Umari road, Sec-04, Kurukshetra
 Haryana, 136118, Contact No : 8860258930
 State Name : Haryana, Code : 06

136118

Buyer (Bill to)
DCDC Health Service Pvt. Ltd.
 C-185, Mayapuri Industrial Area phase- 2,
 Mayapuri, New Delhi-110064
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	HEPARIN INJECTION (25000 I.U.) BATCH NO-A23LV070A	30021290	100 NOS	135.00	NOS	13,500.00

Stock/No. of Boxes Received ... **12**
 Subject to Physical Check
 Name/Employee Code ... **DL02625**
 Centre Name ... **Kurukshetra**
 Date/Time ... **24/7/23**
 Signature ... **Rushend 914060532**

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SUBJECT TO GURUGRAM JURISDICTION

This is a Computer Generated Invoice