



Original Copy

TAX INVOICE Gupta Medical Device

KHASHRA NO 106/1,GROUND FLOOR, POOTH KALA VILLAGE NEAR 12
NOB TRANSFERMAR DELHI 110086

PAN : AWNPS2841N

GSTIN : 07AWNPS2841NLZT

Tel. : 8470009615, 9810371170 email : gmdevice@yahoo.com

Drug Licence No. : RMD/DCD/23/ZO-5170/2023

Invoice No. : GMD/0484/23-24
Dated : 21-11-2023
Place of Supply : Delhi (07)
Reverse Charge : N
Buyer Order No : 76-112023-24166
Order Date :

Supplier Ref. :
Other Ref. :
Delivery Note :
Mode/terms of P :
Despatch Throug :
Destination :

Billed to :
DCDC HEALTH SERVICE PVT
C-185,MAYAPURI INDUSTRIAL AREA PHASE 2
DELHI 11007

Party PAN : AAFC00204K
GSTIN / UIN : 07AAFC00204K1Z1
D.L. No. :

Shipped to :
DCDC HEALTH SERVICE PVT
DISTRICT HOSPITAL DEORIA
POSTPARTUM CHAURAHA
DEORIA 274001

Party PAN : AAFC00204K
GSTIN / UIN : 07AAFC00204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Code	Qty.	Unit	Price	CGST Rate	CGST Amount	SGST Rate	SGST Amount	Amount(₹)
1.	SODIUM HYPOCHLORIDE 10% JAR	28289011	6.00	JAR	180.00	9.00 %	97.20	9.00 %	97.20	1,274.40

Less : Rounded Off (-)

1,274.40
0.40

Grand Total 6.00 JAR

₹ 1,274.00

Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
18%	1,080.00	97.20	97.20	194.40

Rupees One Thousand Two Hundred Seventy Four Only

Declaration

Section -9

BANK NAME : PUNJAN NATIONAL BANK, BRANCH : SANT NAGAR BURARI

A/C NO : 17294015001319 IFSC CODE : PUNB0172910

Bank Details : BANK DETAILS : GUPTA MEDICAL DEVICE BANK NAME & BRANCH : PNB
ACCOUNT NO : 1710005502127812 IFSC CODE : PUNB0171000

Terms & Conditions

E.& O.E.

1. Goods once sold will not be taken back.
2. Interest @ 18% p.a. will be charged if the payment is not made with in the stipulated time.
3. Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :

Stock/No. of Boxes Received 2
 Subject to Physical Check
 Name/Employee Code DCROSSY / K. N. Sankar
 Date 21/11/2023
 Signature [Signature]

For Gupta Medical Device

Authorised Signatory