

# GST INVOICE

Original for Buyer

<b>MAALAKSHMI ENTERPRISES</b> NAIMUHALLA DALTONGANJ, PALAMU JHARKHAND-822101 Phone: 9304363639 E-Mail: <a href="mailto:maalakshmi.contracts@gmail.com">maalakshmi.contracts@gmail.com</a> GSTIN: 20CFZPS6165N1ZHD.LNO.JH-PAL-132518/19	Invoice No.: <b>M-333</b>	Date: <b>17-08-2024</b>	
	Delivery: Delivered	Terms Of Payment <b>CREDIT</b>	
	Suppliers Ref.	Other Reference(s)	
	Buyer Order No <b>152-082024-27072</b>	Dated <b>05-08-2024</b>	
<b>Bill To:-</b> DCDC HEALTH SERVICE PVT. LTD. C-185, MAYAPURI INDUSTRIAL AREA PHASE-2 MAYAPURI, NEW DELHI-110064 State: 07 CINNO: U85190DL2014PTC265804 Phone No.:  GSTIN: 07AAFCD0204K1Z1	Dispatch Document No	Dated <b>17-08-2024</b>	
	Dispatch through	Destination Rajnandgaon	
	<b>Shipping Address-</b> DCDC Health Service Pvt. Ltd. @ Atal Bihari Vajpayee Memorial Govt Medical College District Rajnandgaon, Pendri, 491441 Contact No : 8349482632		

No.	Description of Goods	Quantity	Rate	Dis%	Amount
1.	N.S. 1000 ML	144 PCS	32.00	0.00	4608.00
<b>SUBTOTAL</b> IGST 12% SHIPPING CHARGE Round off					<b>4608.00</b> 552.96 600.00 +.04
<b>TOTAL</b>					<b>5761.00</b>

Stock/Invoices Received **14**  
 Date/Time **24.8.24**  
 Signature   
 Name **Atal Bihari Vajpayee Hospital**  
 Phone No. **8349482632**

(IGST 4608 \* 12% = 552.96 IGST, CESS: 0% = 0)

**Amount Chargeable (in words)**  
 Rs. Five Thousand Seven Hundred And Sixty Only

**Terms & Conditions**

Goods once sold will not be taken back or exchanged. Bills not paid due date will attract 24% interest. All disputes subject to DALONGANJ Jurisdiction only. Prescribed Sales Tax declaration will be given.

**BANK DETAILS:-**  
**BANK NAME:-UCOBANK, BRANCH:-DALTONGANJ A/CNO.23540510002773, IFSC: UCBA0002354**

For MAALAKSHMI ENTERPRISES  
  
 Authorised Signatory