

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	T0001251	Order No.		Cases	0
Invoice Date	22-09-2023	Order Date		Transport	
Due Date	22-09-2023	L.R. No.			
		L.R. Date	22-09-2023		


S.	Qty.	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P	Rate	DIS	SGST	CGST	Amount	Net Amount
1.	1440	ALKE		NS IP 0.9% 1000ML	S1FCW708	6/25	3005	65.25	30.00	0.00	6.00	6.00	43200.00	48384.00

Stock/No. of Boxes Received ..... 132 box  
Subject to Physical Check  
Name Employee Code ..... DC/1077  
Centre Name ..... DCDC Health Service Pvt Ltd  
Date Time ..... 22/09/23 ..... 5:00 PM  
Signature ..... M. No. ....

CLASS	TOTAL	SCHEME	DISCOUNT	SGST	CGST	TOTAL GST	TOTAL	43200.00
GST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00	DIS AMT.	0.00
GST 12.00%	43200.00	0.00	0.00	2592.00	2592.00	5184.00	SGST PAYBLE	2592.00
GST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00	CGST PAYBLE	2592.00
GST 28 %	0.00	0.00	0.00	0.00	0.00	0.00	CR/DR NOTE	0.00
<b>TOTAL</b>	<b>43200.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2592.00</b>	<b>2592.00</b>	<b>5184.00</b>		

Rs. Forty Eight Thousand Three Hundred Eighty Four 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.  
Bills not paid due date will attract 24% interest.

FOR R.C. HEALTH CARE  
  
Authorized Signatory

**Grand Total**  
**48384.00**