

P.M.SURGICAL

KHAJANTI CHOWK FATIMA ROAD GORAKHPUR
09-UTTAR PRADESH

Phone : 9554681519,6386426486

GST INVOICE

D.L.No. : UP5320B002166,UP5321B002166

GSTIN : 09JGEP9467Q1ZW

Invoice No. : **A000283** Date : **27-07-2023**
Order No. : 9707202323
L.R. No. :
Cases : 145
Transport :
Due Date : **27-07-2023**

M/s DCDC HEATH SERVICE PVT.LTD
DISTRICT HOSPITAL GAZIPUR 8115409765
09-UTTAR PRADESH

PH.NO.: 8115409765

S.	Qty.	Pack	Product	Batch	Exp	HSN	MRP	Rate	DIS	SGST	CGST	Amount
1.	1500	1LTR	NS 1000ML BFS	S1C30086	12/24	300490	0.00	23.00	0.00	6.00	6.00	34500.00
2.	500	500ML	NS 500 KRPL	S1V30809	5/25	3004	0.00	14.00	0.00	6.00	6.00	7000.00

Stock/No. of Boxes Received **145 Boxes**
Subject to Physical Check **Done**
Name/Employee Code **0902113**
Centre Name **Gazipur**
Date/Time **9:18 AM 28/07/23**
Signature **[Signature]** M. No. **8115409765**

GST 41500*6+6%=2490SGST+2490CGST, CESS:0%=0

SUB TOTAL **41500.00**
SGST 6 % **2490.00**
CGST 6 % **2490.00**
FREIGHT **2500.00**
CR/DR NOTE **0.00**
GRAND TOTAL **48980.00**

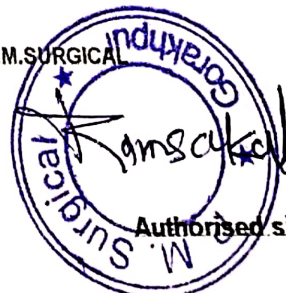
Rs. Forty Eight Thousand Nine Hundred Eighty Only

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 KUSHINAGAR Jurisdiction only.
Prescribed Sales Tax declaration will be given.

certified that the particulars given above are true and correct
the amount indicated represents the price actually charged.

Checked By _____
E.&O.E.

For P.M.SURGICAL

Authorized signatory