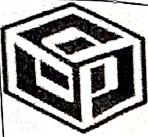


Tax Invoice



PINE PHARMA (P) LTD
 D-91/2 OKHLA INDUSTRIAL AREA
 PHASE-1, NEW DELHI - 110020
 Ph: 011-26810112, 26810114
 Fax: 011-41611894
 D.L.No RMD/DCD/HQ-2099/1152 Dt: 02/07/2024
 Mfg. D.L. : MFG/MD/2024/000276
 PAN No: AAACP1693F
 GSTIN/UIN: 07AAACP1693F1Z1
 State Name : Delhi, Code : 07
 E-Mail : pinepharma@hotmail.com

Invoice No. 594/2024-25	Dated 24-Jul-24
Delivery Note	Mode/Terms of Payment
Reference No. & Date. 594/2024-25 dt. 24-Jul-24	Other References
Buyer's Order No. 12-0720274-26667	Dated 4-Jul-24
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination Tarak Hos
Terms of Delivery	

Consignee (Ship to)
DCDC Health Services Pvt Ltd.
 TARAK HOSPITAL, C-7 Jai Bharat Enclave
 Dwarka More, Najafgarh Road Block C Dwarka, New Delhi - 110059
 State Name : Delhi, Code : 07
 Buyer (Bill to)
DCDC Health Services Pvt Ltd.
 C-185, Mayapuri Industrial Area phase- 2,
 Mayapuri, New Delhi-110064, CIN No. - U85190DL2014PTC265804
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

Sl No.	Description of Goods	HSN/SAC	Alt. Quantity		Quantity		Rate	per	Disc. %	Amount
			Shipped	Billed	Shipped	Billed				
1	Dry -Citrate 50 Lit Mix Part (A +B) With Dextrose For Haemodialysis (1 Pkt PartA+2 Pkt PartB) Part A Batch No: DCD-2409 Mfg&Exp: 07/24-2 Yr Part B Batch No: DCP-2404 Mfg&Exp: 07/24-2 Yr Dextrose Pk02BoxX10 PktBatch No: DX-2404 07/24-2Y 10 Box + 10 Box +02 Box CGST @12% SGST @12%	30049099	10 Box	10 Box	20 Pkt	20 Pkt	875.00	Pkt		17,500.00
								6 %		1,050.00
								6 %		1,050.00
	Total		10 Box	10 Box	20 Pkt	20 Pkt				₹ 19,600.00

Stock/No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature M. S.

Stock/No. of Boxes Received **22 Box**
 Subject to Physical Check **7**
 Name/Employee Code **Tarak Hos**
 Centre Name **3P**
 Date/Time **24-7-24**
 Signature **PK**

Amount Chargeable (in words)
Indian Rupees Nineteen Thousand Six Hundred Only E. & O.E

Declaration
 We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Company's Bank Details
 A/c Holder's Name: **PINE PHARMA (P) LTD**
 Bank Name : **IDFC FIRST BANK**
 A/c No. : **10043262598**
 Branch & IFS Code: **OKHLA NEW DELHI & IDFB0020107**
 SWIFT Code :

Customer's Seal and Signature

for PINE PHARMA (P) LTD
 Authorised Signatory

SUBJECT TO DELHI JURISDICTION
 This is a Computer Generated Invoice