

Tax Invoice

POLY MEDICINE LTD

(GST Invoice as per Rule 46)

Original for Buyer

Poly Medicine Limited

Registration Number: 27/1004
 Address: 1102593, New Delhi
 Email: info@polymed.com
 Phone: 011-26321838, 33550700



Branch: AAAC (PUNE) City: LAOSAR (PUNE)
 GSTIN: 27AAAC1222122 State Code: 06 Karnataka

Customer Purchase Order No./Date: 50479/03/2024

Invoice No & Date: 2315112237 / 11.03.2024

Name & Address of Customer/Bill to

1102593
 M/s DCK Health Services Pvt Ltd
 C-18 1st Floor Mayapuri Industrial Area, Phase-II New Delhi 110064 Delhi (India)
 TEL No: 01145581966, 8506095916 Email: com@dhdc.co.in
 Drug Lic No: A/11/2/9999

Consignee/Ship To

1501458
 M/s DCK Health Service Pvt Ltd
 TH Indrapura Taluk hospital Siddapur Uttarakannada District 581355 Karnataka (India)
 TEL No: 8867417904 Email:
 Drug Lic No: A/11/2/9999
 GSTIN: PAN
 State Code: 29 - Karnataka

Payment Terms: Payment Due in 120 Days
 Delivery Terms: FOB Delhi
 Sales Order: 50479/03/2024
 Del No: 50479/03/2024
 Payment Method: Normal Sales

Place of Supply: 07 Delhi
 Date of Issue of Invoice: 11.03.2024
 Mode of Transport & Vehicle No: BY ROAD /
 Transporter: GATI EXPRESS & SUPPLY CHAIN

Bank Detail: STATE BANK OF INDIA
 BRANCH: FARIDABAD
 A/C NO: 1041010175
 IFSC CODE: SBIN00099950

G.R.A.R. No / Date: 117843345

Scan & Pay Using Any UPI App to: UPI ID: polymed@sb

QR Code

| S.No | Description of Goods | HSN Code | No. of Pkg | Quantity NO (s) | Rate/Unit INR | Taxable Value | IGST Rate (%) | IGST Amount |
|--|--|----------|------------|-----------------|---------------|----------------------------|---------------|------------------|
| 1 | HAEMOFILUX LFP 130 ML PC PML-D B/No: B075024B[Mfg: 2024-02, Exp: 2027-01]1252 | 90189031 | 9 | 252.00 | 242.0000 | 60,984.00 | 5 | 3,049.20 |
| TOTAL | | | | | | | | |
| | | | | | | Taxable Value | | 60,984.00 |
| IGST (INR) Rupees: Three Thousand Forty Nine And Twenty Paise Only | | | | | | IGST | | 3,049.20 |
| | | | | | | IGST | @0.1% | 64.03 |
| | | | | | | Rounding Off | | 0.23 |
| Grand Total (In INR in Words): Rupees Sixty Four Thousand Ninety Seven Only | | | | | | Grand Total (INR) | | 64,097.00 |

Remarks: Whether tax is payable on reverse charge: NO
 PO No: 201-032024-25476 email dt: 06.03.24/00.00.0000
 Sale Order No: 101022266/09.03.2024
 Del No: B110224369/11.03.24

Confirmed that the Particulars stated above are true and correct and the price indicated represents the price actually charged and there is no flow of additional consideration directly or indirectly from the buyer

Terms & Conditions

- Interest @ 15% will be charged if payments are made after the due date
- IGST will be applicable on Interest & Penalty for delayed payment
- Goods are insured under Marine Cargo open Policy
- Goods once sold will not be taken back
- All disputes are subject to Faridabad jurisdiction only

Signature:
 Date/Time:
 Centre Name:
 Name/Employee Code:
 Subject to Physical Check

Stock/No. of Boxes Received: 69
 Subject to Physical Check
 Name/Employee Code: Pawan Naik
 Centre Name: T. H. Siddapur
 Date/Time: 11/03/2024
 Signature: [Signature]



4572

For Poly Medicine Limited

Prepared By: Sanjay kumar

Checked By: [Signature]

Authorised Signatory: [Signature]

Regd Office: 232B, 3rd FLOOR, OKHIA INDUSTRIAL ESTATE PHASE - III, NEW DELHI - 110020, INDIA
 Phones: 011-26321838, 33550700 Fax: 26321894/39 Email: customercare@polymedicine.com, info@polymedicine.com Website: www.polymedicine.com

Tax Invoice

(11% 31 read with Rule 66)

FORM 11 (REV. 01-2024)

Original for Buyer

Poly Medicure Limited

Plot No. 33/34, Sector 68, IMT
Faridabad Haryana, India, 121004
Phone: 01293350700 Fax: N/A
Email: plant@polymedicure.com
Mfg Drug License No. MFG/MD/2018/000032, MFG/MD/2020/000183
Whole sale Drug License No. RL21B2023HR000464/20B2023HR000470



PAN No. AAACP3891P CTN No. LAR300DL1995PLC066923
GSTIN 06AAACP3891P1ZV State Code 06 - Haryana

Customer Purchase Order No./Date: SHOW BELOW

Invoice No & Date : 2315112258 / 11.03.2024

Name & Address of Customer/Bill to 1102593

M/s DCDC Health Services Pvt Ltd
C-185, 1st Floor, Mayapuri Industrial Area, Phase-II, New Delhi 110064, Delhi (India)
TEL No. 01145581006, 8506005916 Email scm@dcdc.co.in
Drug Lic N/A 31 12 9999
GSTIN 07AAAFCD0204K1Z1 PAN AAFCD0204K

Consignee/Ship To

M/s DCDC Health Service Pvt Ltd 1501458
TH Siddapura Taluk hospital siddapur Uttarakannada district 581355, Karnataka (India)
TEL No. 8867417094, Email
Drug Lic N/A 31 12 9999
GSTIN: PAN
State Code: 29 - Karnataka

Payment Terms: Payment Due in 120 Days
Delivery Terms: FOR Delhi
Sales Order: SHOW BELOW
Del No: SHOW BELOW
Payment Method: Normal Sales

Place of Supply: 07 - Delhi
Date of Issue of Invoice: 11.03.2024
Mode of Tpt & Vehicle No: BY ROAD /
Transporter: GATI EXPRESS & SUPPLY CHAIN

Bank Detail: STATE BANK OF INDIA
SME BRANCH, FARIDABAD
A/C No. 10410101725
IFSC CODE# - SBIN0009950

G.R/L.R. No./Date: 117843895

Scan & Pay Using Any UPI App to UPI ID: polymed@sbi

QR Code

| S.No | Description of Goods | HSN Code | No. of Pkg | Quantity NO (s) | Rate/Unit INR | Taxable Value | IGST Rate(%) | IGST Amount |
|--------------|--|----------|------------|-----------------|---------------|------------------|--------------|-----------------|
| 1 | HAEMOLINE - BLOOD LINE SET POST PUMP B/No.6066124B[Mfg:2024-02,Exp:2029-01]240, | 90183990 | 6 | 240.00 | 83.5000 | 20,040.00 | 12 | 2,404.80 |
| TOTAL | | | | | | 20,040.00 | | 2,404.80 |

| | | |
|--|---------------|------------------|
| IGST (INR) Rupees Two Thousand Four Hundred Four And Eighty Paise Only | Taxable Value | 20,040.00 |
| | IGST | 2,404.80 |
| | TCS | 22.44 @0.1% |
| | Rounding Off | 0.24 |
| Grand Total (INR) | | 22,467.00 |

Remarks: Whether tax is payable on reverse charge: NO

PO No.: 201-032024-25305 email dt, 06.03.24/00.00.0000
Sale Order No.: 1010222333/09.03.2024
Del No.: 8110224385/11.03.24

Certified that the Particulars stated above are true and correct and the price indicated represents the price actually charged and there is no flow of additional consideration directly or indirectly from the buyer

Terms & Conditions

- Interest @ 15% will be charged if payments are made after the due date.
- GST will be applicable on Interest & Penalty for delayed payment.
- Goods are insured under Marine Cargo open Policy.
- Goods once sold will not be taken back.
- All disputes are subject to Faridabad jurisdiction only.

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Stock/No. of Boxes Received 06
Subject to Physical Check
Name/Employee Code Pallavi Nautik
Centre Name T. H. Siddapura
Date Time 20/03/2024
Signature @LJ M. N. 7090609181



For Poly Medicure Limited

Prepared By Chetan Kumar Chaudhary

Checked By

Authorised Signatory

Regd Office: 232B, 3rd FLOOR, OKHLA INDUSTRIAL ESTATE PHASE - III, NEW DELHI - 110020, INDIA
Phones: 011-26321838, 33550700 Fax: 26321894/39 Email: customercare@polymedicure.com, info@polymedicure.com Website: www.polymedicure.com

Tax Invoice

(U/S 11 read with Rule 46)

FFG/S 01 REV NO - 02

Original for buyer

Poly Medicare Limited

PLOT NO 33-34, Sector 68, IMT
Faridabad Haryana, India, 121004
Phones 01293355070 Fax N/A
Email plant@polymedicare.com
Mfg Drug License No. MFG/MD/2018/000032, MFG/MD/2020/000183
Whole sale Drug License No. RLF21B2023HR000464/20B2023HR000470



PAN No. AAACP3891P CTN No. L40300DL1995PLC066923
GSTIN 06AAACP3891P1ZV State Code 06 - Haryana

Customer Purchase Order No./Date: SHOW BELOW

Invoice No & Date : 2315112259 / 11.03.2024

Name & Address of Customer/Bill to

1102593
M/s. DCDC Health Services Pvt. Ltd
C-185, 1st Floor, Mayapuri Industrial Area, Phase-II, New Delhi 110064, Delhi (India)
TEL No. 01145581006, 8506005916 Email: scm@dcdc.co.in
Drug Lic N/A 31.12.9999
GSTIN 07AAFC0204K1Z1 PAN:AAFC0204K

Consignee/Ship To

1501458
M/s. DCDC Health Service Pvt. Ltd
TH Siddapura Taluk hospital siddapur Uttarakannada district 581355, Karnataka (India)
TEL No. 8867417094, Email:
Drug Lic N/A 31.12.9999
GSTIN: PAN:
State Code: 29 - Karnataka

Place of Supply : 07 - Delhi
Date of Issue of Invoice : 11.03.2024
Mode of Tpt & Vehicle No : BY ROAD /
Transporter : GATI EXPRESS & SUPPLY CHAIN

G.R/L.R. No./ Date: 117843895

IRN 5b2a47b45413f075a2fe96496fda116ba386d3a121807501f064d2ce54b10628

Payment Terms: Payment Due in 120 Days
Delivery Terms: FOR Delhi
Sales Order: SHOW BELOW
Del No: SHOW BELOW
Payment Method: Normal Sales

Bank Detail: STATE BANK OF INDIA
SME BRANCH, FARIDABAD
A/C NO. 10410101725
IFSC CODE# - SBIN0009950



Scan & Pay Using Any UPI App to UPI ID polymed@sbi



| S.No | Description of Goods | HSN Code | No. of Pkg | Quantity NO (s) | Rate/Unit INR | Taxable Value | IGST Rate(%) | IGST Amount |
|--------------|--|----------|------------|-----------------|---------------|-----------------|--------------|-----------------|
| 1 | A.V. FISTULA NEEDLE 16 G (DOUBLE PACK) B/No.8065824B Mfg:2024-02,Exp:2029-01 250, | 90183990 | 1 | 250.00 | 17.5000 | 4,375.00 | 12 | 525.00 |
| 2 | A.V. FISTULA NEEDLE 17G (DOUBLE PACK) B/No.8054224B Mfg:2024-02,Exp:2029-01 250, | 90183990 | 1 | 250.00 | 17.5000 | 4,375.00 | 12 | 525.00 |
| 3 | TRANSUDUCER PROTECTOR B/No.8067124B Mfg:2024-02,Exp:2029-01 100, | 90183990 | 1 | 100.00 | 5.5000 | 550.00 | 12 | 66.00 |
| TOTAL | | | 3 | 600.00 | | 9,300.00 | | 1,116.00 |

Taxable Value 9,300.00

IGST (INR) Rupees One Thousand One Hundred Sixteen Only

IGST 1,116.00

TCS @0.1% 10.42

Rounding Off 0.42

Grand Total (In INR in Words): Rupees Ten Thousand Four Hundred Twenty Six Only

Grand Total (INR) 10,426.00

Remarks: Whether tax is payable on reverse charge: NO

PO No.: 201-032024-25305 email dt, 06.03.24/00.00.0000

Sale Order No. 1010222333/09.03.2024

Del No. 8110224386/11.03.24

Certified that the Particulars stated above are true and correct and the price indicated represents the price actually charged and there is no flow of additional consideration directly or indirectly from the buyer

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- All disputes are subject to Faridabad jurisdiction only

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Stock/No. of Boxes Received 03
Subject to Physical Check
Name (Employee Code) Pawan Naik
Centre Name T.H. Siddapur
Date/Time 20/03/2024
Signature M. No. 7090609181



For Poly Medicare Limited

Prepared By Chetan Kumar Chaudhary

Checked By

Authorised Signatory

Regd Office: 232B, 3rd FLOOR, OKHLA INDUSTRIAL ESTATE PHASE - III, NEW DELHI - 110020, INDIA
Phones: 011-26321838,33550700 Fax:26321894/39 Email: customercare@polymedicare.com, info@polymedicare.com Website: www.polymedicare.com