

P.M.SURGICAL

KHAJANTI CHOWK FATIMA
 ROAD GORAKHPUR 273003
 Phone : 9554681519,6386426486
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CREDIT GST INVOICE

GSTIN : 09JGEP9467Q1ZW
 UDYAM NO : UDYAM-UP-47-0008828
 DL NO : UP5320B002166
 UP5321B002166

Invoice : A000315
 Date : 09-09-2024
 Transport : LOCAL
 CASE : 160

Order No : 5409202427319
 Order Date : 04-09-2024

Details of Reciever (Billed to)

Name : DCDC HEALTH SERVICE PVT. LTD.
 Address : C-185,MAYAPURI INDUSTRIAL AREA PHASE-2
 MAYAPURI NEW DELHI
 State & Code 07-DELHI
 Mob No : 8506000148
 GSTIN/UIN : 07AAAFCD0204K1Z1

Details of Consignee (Shipped to)

Name : DCDC DISTRICT HOSPITAL
 Address : PADRAUNA
 Mob No : 7004514047
 State & Code : 09-UTTAR PRADESH
 GSTIN/UIN :

| S. | Qty. | Free | Pack | Product | Batch | Exp | HSN | MRP | Rate | DIS | IGST | Amount | |
|----|------|------|------|---------------|----------|------|--------|------|-------|------|-------|--------|----------|
| 1. | 1920 | | 1LTR | NS 1000ML BFS | S1C41192 | 7/26 | 300490 | 0.00 | 32.50 | 0.00 | 12.00 | 0.00 | 62400.00 |

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

Stock/No. of Boxes Received 160 Box.
 Subject to Physical Check 160 Box.
 Name/Employee Code 0200240.....
 Centre Name
 Date/Time 12/09/24 5 PM
 Signature
 M. No. 7004514047

SUB TOTAL 62400.00
 IGST 12 % 7488.00
 FREIGHT 3000.00
GRAND TOTAL 72888.00

Rs. Seventy Two Thousand Eight Hundred Eighty Eight 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 Jurisdiction only.
 Prescribed Sales Tax declaration will be given.
 Bank : UNION BANK RAPTI NAGAR GKP
 A/C NO : 757601010050188 IFSC : UBIN0575020

Handwritten signature and date 09/09/24

For P.M.SURGICAL

 Authorised signatory