

<p><b>Poly Medicare Limited</b>                  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</p>	 PAN No.: AAACP3891P      CIN No.: L40300DL1995PLC066923 GSTIN : 06AAACP3891P1ZV      State Code : 06 - Haryana
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Customer Purchase Order No./Date: SHOW BELOW ↓      **Invoice No & Date : 2415110736 / 28.10.2024**

<p><b>Name &amp; Address of Customer/Bill to 1102593</b>                  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:AAAFCD0204K</p>	<p><b>Consignee/Ship To 1501047</b>                  M/s. DCDC Health Service Pvt. Ltd                  DH, Kothagudem Govt Area Hospital, Gajularajam Bhashti, Bajanmandir Road, Dist-Bhadradi Kothagudam 507101, Telangana ( India )                  TEL No. 8588850032 , Email:                  Drug Lic:N/A 31.12.9999                  GSTIN: PAN:                  State Code: 36 - Telangana</p>
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<p>Payment Terms: Payment Due in 120 Days                  Delivery Terms: FOR Delhi                  Sales Order : SHOW BELOW ↓                  Del. No : SHOW BELOW ↓                  Payment Method : Normal Sales</p>	<p>Place of Supply : 07 - Delhi                  Date of Issue of Invoice : 28.10.2024                  Mode of Tpt &amp; Vehicle No.: BY ROAD /                  Transporter : GATI EXPRESS &amp; SUPPLY CHAIN</p>
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<p>Bank Detail: STATE BANK OF INDIA                  SME BRANCH, FARIDABAD                  A/C NO. 10410101725                  IFSC CODE# - SBIN0009950</p>	<p>G.R./L.R. No./ Date: 315407819</p>
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Scan & Pay Using Any UPI App to UPI ID : polymed@sbil

S.No	Description of Goods	HSN Code	No. of Pkg	Quantity NO (s)	Rate/Unit INR	Taxable Value	IGST Rate( %)	IGST Amount
1	HAEMOFLUX MFP 140 ME PC PML-D B/No.8537924L[Mfg:2024-10,Exp:2027-09]84,	90189031	3	84.00	252.5000	21,210.00	5	1,060.50
<b>TOTAL</b>						<b>21,210.00</b>		<b>1,060.50</b>
						<b>Taxable Value</b>		<b>21,210.00</b>
IGST: ( INR ) Rupees One Thousand Sixty And Fifty Paise Only						IGST		<b>1,060.50</b>
						TCS	@0.1%	<b>22.27</b>
						Rounding Off		<b>0.23</b>
Grand Total (In INR in Words): Rupees Twenty Two Thousand Two Hundred Ninety Three Only						<b>Grand Total For Customer ( INR )</b>		<b>22,293.00</b>

Remarks: Whether tax is payable on reverse charge: NO  
 PO No.: 135-102024-27776 email dt, 04.10.24/00.00.0000  
 Sale Order No.: 1010249656/09.10.2024  
 Del No.: 8110247996/28.10.24

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.

IRN : d193176c46a54270c48e65ac749a4b51384f98517ca99a8f1e9a9bc977a90a9d

3267

Qty/No. of Boxes Received ..... 3 .....  
 Subject to Physical Check  
 Name/Employee Code ..... R. Balan .....  
 Centre Name : Kothagudem  
 Date/Time ..... 27.11.2024 .....  
 Signature ..... M. No. ....

<p>Prepared By Chetan Kumar Chaudhary</p>	<p>Checked By </p> <p>For Poly Medicare Limited                  Authorised Signatory </p>
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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