

R.C. HEALTH CARE
Pharmaceutical Distributors
 F7/31 SEC-11 PRATAP VIHAR GHAZIABAD
 OPP-LEELAWATI SCHOOL

Phone : 7838223890
 Licence No. : UP1420B000461/UP1421B000458
 GSTIN : 09AARFR8679M1ZU

GST INVOICE

CREDIT

Party Name :
DCDC HEALTH SERVICE PVT. LTD.
 C-185MAYAPURI INDUSTRIAL AREA PHASE 2 N DELHI
 CENTER- CIVIL HOSPITAL GHAZIABAD.
 09-UP
 PHONE. : 8506002727

Invoice No	T0002074	Order No.	Cases
Invoice Date	23-01-2024	Order Date	0
Due Date	23-01-2024	L.R. No.	Transport
		L.R. Date	23-01-2024

S.	Qty.	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P	Rate	DIS	SGST	CGST	Amount	Net
1.	200	JEDU		D25 100ML FFS	G3QA05	11/25	30049099	22.40	15.00	0.00	6.00	6.00	3000.00	3360.00
2.	625	JEDU		NS 500ML FFS	LV3297	11/25	30049099	0.00	19.00	0.00	6.00	6.00	11875.00	13300.00

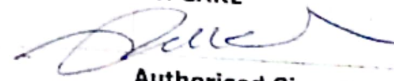
Stock/No. of Boxes Received *22*
 Subject to Physical Check *DCDC 1077*
 Name/Employee *DCDC 26*
23/1/24 5:20 PM

CLASS	TOTAL	SCHEME	DISCOUNT	SGST	CGST	TOTAL GST	
GST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00	Total Items :- 2
GST 12.00%	14875.00	0.00	0.00	892.50	892.50	1785.00	Total Qty :- 825
GST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00	
GST 28 %	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	14875.00	0.00	0.00	892.50	892.50	1785.00	

TOTAL 14875.00
 DIS AMT. 0.00
 SGST PAYBLE 892.50
 CGST PAYBLE 892.50
 CR/DR NOTE 0.00

Rs. Sixteen Thousand Six Hundred Sixty Only
 BANK NAME PNB A/c no. 3346002100007556. IFSC code: PUNB0394600

Terms & Conditions
 The rate of products is valid only for current Invoice.
 All disputes subject to Jurisdiction only.
 Bills not paid due date will attract 24% interest.

FOR **R.C. HEALTH CARE**

 Authorized Signatory

Grand Total
16660.00