

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
 KIDNEY CARE MOTI NAGAR H-1 KAILASH PARK, NEAR
 MOTI NAGAR MEYRO STATION PILLAR NO,330
 09-UP
 PHONE : 8840000500

Invoice No	T0001499	Order No. Order Date	Cases	0
Invoice Date Due Date	19-10-2023 19-10-2023	L.R. No. L.R. Date	Transport	

S.	Qty.	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P	Rate	DIS	SGST	CGST	Amount	Net Amount
1.	700	JEDU		D25 100ML FFS	G3QA02	12/24	30049099	21.28	15.00	0.00	6.00	6.00	10500.00	11760.00

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

CLASS	TOTAL	SCHEME	DISCOUNT	SGST	CGST	TOTAL GST	TOTAL	10500.00
GST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00		
GST 12.00%	10500.00	0.00	0.00	630.00	630.00	1260.00		
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	10500.00	0.00	0.00	630.00	630.00	1260.00		

Total Items :- 1
 Total Qty :- 700

DIS AMT.	0.00
SGST PAYBLE	630.00
CGST PAYBLE	630.00
CR/DR NOTE	0.00

Rs. Eleven Thousand Seven Hundred Sixty Only
 BANK NAME: PNB, A/c no. 3946002100007556, 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
 11760.00