


Domestic Sales Invoice


Tax Invoice
(U/S 31 read with Rule 46)

1/FG/5.01 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.: RLF21B20231R000464/20B20231R000470		
	PAN No.: AAACP3891P GSTIN: 06AAACP3891P1ZV	CIN No.: LA0300DL1995PLC066923 State Code: 06 - Haryana

Customer Purchase Order No./Date: SHOW BELOW ↓ **Invoice No & Date : 2415106789 / 22.08.2024**

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:AAAFCD0204K	Consignee/Ship To 1500455 M/s. DCDC Health Service Pvt. Ltd Sadar Hospital Dumka SOUTH BLOCK 1st FLOOR DIALYSIS UNIT NEW BUILDING Sadar Hospital Dumka 814101, Jharkhand (India) TEL No, 7209638909, Email: Drug Lic:N/A 31.12.9999 GSTIN: PAN: State Code: 20 - Jharkhand
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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: 22.08.2024 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 Scan & Pay Using Any UPI App to UPI ID : polymed@sbi	G.R/L.R. No./ Date: 148327920 

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.1069924F Mfg:2024-06,Exp:2029-05 40.	90183990	1	40.00	84.0000	3,360.00	12	403.20
TOTAL						3,360.00		403.20

IGST (INR) Rupees Four Hundred Three And Twenty Paise Only.	IGST TCS @0.1%	403.20 3.76
Grand Total (In INR in Words): Rupees Three Thousand Seven Hundred Sixty Seven Only	Grand Total (INR)	3,767.00

Remarks: Whether tax is payable on reverse charge: NO
 PO No.: 33-082024-27050 email dt, 05.08.24/00.00.0000
 Sale Order No.: 1010241439/06.08.2024
 Del No. 8110240161/22.08.24

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

Stock/No. of Boxes Received 1
 Subject to Physical Check
 Name/Employee Code Swarnap/ DC00894
 Centre Name Dumka
 Date/Time 30/8/24 11 Am
 Signature M. No. 8506000181

Prepared By Chetan Kumar Chaudhary
 Checked By
 For Poly Medicare Limited
 Authorized Signatory

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

Domestic Sales Invoice

Tax Invoice
(U/S 31 read with Rule 46)

F/P/5 01 REV NO -02

Duplicate For Transporter

<p>Poly Medicare Limited PLOT NO 33-34, Sector 68, IMT Faridabad Haryana, India ,121004 Phones: 01293355070 Fax: N/A Email plant@polymedicure.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 : L49300DL1995PLC066923 GSTIN : 06AAACP3891PIZV State Code : 06 - Haryana
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Customer Purchase Order No./Date: SHOW BELOW ↓	Invoice No & Date : 2415106790 / 22.08.2024
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<p>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:AAAFCD0204K</p>	<p>Consignee/Ship To 1500455 M/s. DCDC Health Service Pvt. Ltd Sadar Hospital Dumka SOUTH BLOCK 1st FLOOR DIALYSIS UNIT NEW BUILDING Sadar Hospital Dumka 814101 , Jharkhand (India) TEL No, 7209638909 , Email: Drug Lic:N/A 31.12.9999 GSTIN: PAN: State Code: 20 - Jharkhand</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 : 22.08.2024 Mode of Tpt & Vehicle No.: BY ROAD / Transporter : GATI EXPRESS & SUPPLY CHAIN</p>
<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: 148327920</p>

Scan & Pay Using Any UPI App to UPI ID : polymed@sbi IRN : b78120e489f05544b6e663a42ce15f6bf7bc71355d029acfo1127ead3af

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.8377224H Mfg:2024-08,Exp:2029-07 250,	90183990	1	250.00	18.5400	4,635.00	12	556.20
TOTAL						4,635.00		556.20
IGST: (INR) Rupees Five Hundred Fifty Six And Twenty Paise Only						Taxable Value		4,635.00
						IGST		556.20
						TCS	@0.1%	5.19
						Rounding Off		0.39-
Grand Total (In INR in Words): Rupees Five Thousand One Hundred Ninety Six Only						Grand Total (INR)		5,196.00

Remarks: Whether tax is payable on reverse charge: NO
 PD No.: 33-082024-27050 email dt, 05.08.24/00.00.0000
 Sale Order No.: 1010241439/06.08.2024
 Del No : 8110240163/22.08.24

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.

Stock/No. of Boxes Received 1
 Subject to Physical Check
 Name/Employee Code Siddhant / DC00894
 Centre Name PJMCH, DUMKA
 Date/Time 30/8/24 at 11:30pm
 Signature [Signature] M. No. 8506000181

Prepared By Chetan Kumar Chaudhary	Checked By <u>[Signature]</u>	For Poly Medicare Limited Authorized Signatory <u>[Signature]</u>
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