

SIDRAMESHWAR PHAMACEUTICAL DISTRIBUTORS

SECTOR NO.31 PLOT NO.B-2
 NEAR UDBHAVA GANESH TEMPLE NAVANAGAR
 BAGALKOT-587103
 Phone 9972345615, 8073070496, 9035628063
 D.L.No KA-BT1-20B-131230 21B-131231
 GSTIN 29ADFFS2895H1Z1

GST INVOICE

Party Name
DCDC HEALTH SERVICE PVT.LTD

CREDIT

GOVERNMENT HOSPITAL
 DIALYSIS UNIT
 07-DELHI
 PHONE : 8867417094

Invoice No	00907	Order No.199-082024-26006	Cases	12
Invoice Date	05-08-2024	Order Date 05-08-2024	L.R. No.	
Due Date	05-08-2024	L.R. Date 05-08-2024	Transport	

GSTIN : 07AAAFCD0204K1Z1

S.	Qty.	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P	Rate	DIS	IGST	Ambunt	Net Amc
1.	288	IVES	1	NS 500ML IVES	404050	3/26	90189099	39.05	22.00	0.00	12.00	0.00	6336.00

Stock/No. of Boxes Received 12
 Subject to Physical Check
 Name/Employee Code M. No. 1625973388
 Centre Name Taluka Hospital
 Date/Time 10/08/2024 at 11AM
 Signature M. No. 1625973388 ,



CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	6
IGST 12.00%	6336.00	0.00	0.00	760.32	0.00	DIS AMT.
IGST 18.00%	0.00	0.00	0.00	0.00	0.00	IGST PAYBLE
IGST 28 %	0.00	0.00	0.00	0.00	0.00	PAYBLE
TOTAL	6336.00	0.00	0.00	760.32	760.32	CR/DR NOTE

Rs Seven Thousand Ninety Six Only

MSG

Terms & Conditions

Goods once sold will not be taken back or exchanged.
 BANK DETAIL: AC/4211201000041,IFSC: CNRB0010853,CANARA BANK,NAVANAGAR
 Bills not paid due date will attract 24% interest.

FOR SIDRAMESHWAR PHAMACEUTICAL DISTRIBUTORS

Authorised Signatory

Grand Total

7096.00