

STAR MEDICOSE

Pharmaceutical Distributors

E-5, GROUND FLOOR, UDYOG NAGAR
ROHTAK ROAD, NANGLOI JAT
DELHI-110041
Phone : 9811280126, 9311280126

GST TAX INVOICE

PAN : ACFPJ1762M

DL.No. : DL-NGJ-129782/DL-NGJ-129783,20B&21B

GSTIN : 07ACFPJ1762M1ZF

M/s DCDC HEALTH SERVICES PVT. LTD.
C-185, MAYAPURI IND. AREA, PH.-2
MAYAPURI State : 07
NEW DELHI

Invoice No.: **A000271**

Date : 12-10-2023

Order No. : 23891

Date : 10-10-2023

L.R. No. :

Date : 12-10-2023

Dispatch Through : DL 1LAH 3638

Transport :

Dispatch Document No. :

CH.Date

8506056008
D.L.No.: CIN - U85190DL2014PTC2
GSTIN :

PAN.:

S.	Product	Make	Pkg.	Batch	Exp.	Case	Qty.	HSN CODE	M.R.P.	Rate	GST	Amount
1	25D	ABARIS	100 ML	A2935005	2/26	1.00	100	30045020	22.40	13.75	12.00	1375.00
2	NS 1000 ML	ABARIS	1000 ML	A3733210	7/26	20.00	240	30045020	65.25	27.95	12.00	6708.00
3	NS 500 ML	ABARIS	500 ML	A3731205	7/26	17.00	476	30045020	39.04	18.65	12.00	8877.40

Stock/No. of Boxes Received 38 Boxes
Subject to Physical Check
Name/Employee Code
Centre Name Tarak Hospital
Date/Time 12/10/23 1:20 P
Signature M. No.
892037140 38 816

DELIVERY : PO:-10-102023-23891
TARAK HOSPITAL, DWARKA MORH

SUB TOTAL 16960.40
SGST 6% 1017.62
CGST 6% 1017.62
Roundoff 0.36
GRAND TOTAL 18996.00

Rs. Eighteen Thousand Nine Hundred Ninety Six Only

Terms & Conditions

Goods once sold will not be taken back or exchanged.
Bills not paid due date will attract 24% interest.
All disputes subject to Jurisdiction only.
Prescribed Sales Tax declaration will be given.
Certified that the particulars given above are true and correct
and the amount indicated represents the price actually charged.
E.&O.E.

Checked By _____

For STAR MEDICOSE



Authorised signatory

BANK DETAILS :-

STATE BANK OF INDIA
A/C No. : 33998442064, BRANCH : MIANWALI NAGAR
IFSC CODE : SBIN0016202