

SIDRAMESHWAR PHAMACEUTICAL DISTRIBUTORS

**GST INVOICE**

Party Name  
**DCDC HEALTH SERVICE FVT.LTD**

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

**CREDIT**

Invoice No	01264	Order No. 201-092024-27216	Cases	21
Invoice Date	17-09-2024	Order Date 04-09-2024	L.R. No.	Transport
Due Date	17-09-2024	L.R. Date 17-09-2024		

GOVERNMENT HOSPITAL  
DIALYSIS UNIT  
07-DELHI  
PHONE. 8867417094

GSTIN 07AAFCD0204K1Z1

S.	Qty.	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P	Rate	DIS	IGST	Ambunt	Net	Amount
1.	100	IVES	100ML	NS 100ML IVES	403100	2/26	30049099	22.05	11.50	0.00	12.00	0.00	1150.00	1288.00
2.	480	IVES	1'S	NS 500ML IVES	408144	7/26	30049099	34.85	22.00	0.00	12.00	0.00	10560.00	11827.20

Stock/No. of Boxes Received ..... 21  
 Subject to Physical Check  
 Name/Employee Code ..... DC03477  
 Centre Name ..... 1.H. SIDDAPUR  
 Date/Time ..... 23/09/2024  
 Signature ..... [Signature] ..... M. No. 709060913



CLASS	TOTAL	SCHEME	DISCOUNT	IGST	TOTAL IGST	TOTAL
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	<b>11710.00</b> DIS AMT. 0.00 IGST PAYBLE 1405.20 PAYBLE 0.00 CR/DR NOTE 0.00
IGST 12.00%	11710.00	0.00	0.00	1405.20	0.00	
IGST 18.00%	0.00	0.00	0.00	0.00	0.00	
IGST 28 %	0.00	0.00	0.00	0.00	0.00	
<b>TOTAL</b>	<b>11710.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1405.20</b>	<b>0.00</b>	

Total Items - 2  
Total Qty - 580

Rs. Thirteen Thousand One Hundred Fifteen 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**  
**13115.00**