

** TAX INVOICE **

S.K. PHARMA

SHOP NO-10, C-BLOCK DDA COMMUNITY CENTRE
NR JANAK CINEMA JANAK PURI NEW DELHI-110058
Phone : MOB. 9911426969, 011-40618191

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GSTIN : 07ASEPK2176P1ZA
State Code : 07
FSSAI No. : 13321011001062

PAN : ASEPK2176
D.L.No.1 : DL-JNK-119455,5
D.L.No.2 : DL-JNK-119454,5
E-mail : skpharma10@gmail.com

Tax is Payable On Reverse Charge : No
Invoice No. : **SKP-23-839**
Invoice Date : **07/07/2023**
State : Delhi State Code : 07

Transportation Mode :
GR / LR No. :
Date of Supply : 07/07/2023
Place of Supply : Delhi
Order No. :
Total Cases : 0.00
GR/LR Date : 07-Jul-23
Vehicle No. :
Dua Date : 07-Jul-23
Ord. Date :

Details of Receiver (Bill To)

Details of Consignee (Shipped To)

Name : **DCDC HEALTH SERVICE PVT LTD.**
Address : **C-185 MAYA PURI INDUSTRIAL AREA
PH-2 MAYAPURI NEW DELHI**
Phone/Mob. :
State : Delhi State Code: 07
GSTIN : **07AAFCD0204K1Z1**
D.L No. :

Name : **DCDC HEALTH SERVICE PVT LTD.**
Address : **CIVIL HOSPITAL
SONEPAT-131001
40-072023-23098**
Phone/Mob. :
State : Delhi State Code: 07
GSTIN : **07AAFCD0204K1Z1**
D.L No. :

Sr.	PARTICULARS	HSN CODE	PACK	BATCH No.	Exp.	MRP.	QTY.	RATE	Total Value	DIS %	Taxable Value	CGST		SGST	
												%	Amount	%	Amount
1.	INJ LIVOCARNIT 5 ML	30049099		L0402307A	05/25	185.00	800	22.00	16800.00	0.00	16800.00	6.0	1008.00	6.0	1,008.00
							800		16800.00		16800.00		1008.00		1008.00

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

No of Items : 1

GST SUMMARY : 16800.00 X 12 % = 2016.00 ,

Gross Total **16800.00**
Add: SGST 1008.00
Add: CGST 1008.00
Total GST 2016.00
Round Off 0.00

Rupees: Eighteen Thousand Eight Hundred Sixteen Only

Inv. Amt. R/Off **18816.00**

Terms & Conditions :-

All disputes are subject to Delhi Jurisdiction.
BREAKAGE & EXPIRY GOODS NOT BE TAKEN BACK OR RETURN

Bank Name : ICICI BANK IFSC CODE : ICIC0000571
Bank A/C : 057105500102 MICR No :
Branch : PALAM

(Computer Generated Invoice)

