

* * 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

Page: 1 of 1

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

PAN : ASEPK2176P
D.L.No.1 : DL-JNK-119455,57
D.L.No.2 : DL-JNK-119454,56
E-mail : skpharma10@gmail.com

Tax is Payable On Reverse Charge : No	Transportation Mode :	Total Cases : 0.00
Invoice No. : SKP-23-679	GR / LR No. :	GR/LR Date : 19-Jun-23
Invoice Date : 19/06/2023	Date of Supply : 19/06/2023	Vehicle No. :
State : Delhi	Place of Supply : Delhi	Due Date : 19-Jun-23
State Code : 07	Order No. :	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
GSTIN : 07AAFCD0204K1Z1
D.L No. :

Name : DCDC HEALTH SERVICE PVT LTD.
Address : CIVIL HOSPITAL JIND
23-062023-22876-5
8295012840
Phone/Mob. :
State : Delhi
GSTIN : 07AAFCD0204K1Z1
D.L No. :

State Code : 07

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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	21.00	16800.00	0.00	16800.00	6.0	1008.00	6.0	1008.00

No of Items : 1

Stock/No. of Boxes Received 800 800 Pcs 16800.00 16800.00 1008.00 1008.00

GST SUMMARY : 16800.00 X 12 % = 2016.00 ,

Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature M. No.

Gross Total	16800.00
Add: SGST	1008.00
Add: CGST	1008.00
Total GST	2016.00
Round Off	0.00
Inv. Amt. R/Off	18816.00

Rupees: Eighteen Thousand Eight Hundred Sixteen Only

Terms & Conditions :-

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

E.&O.E

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

(Computer Generated Invoice)

