

SAFEXPRESSTerms & conditions
are mentioned on
the reverse side
(Scan QR Code).

Waybill No. 1000 1832 7041

Booking Branch GBB251 Pick Up Date 26/10/24 14:24 Ship Date 26/10/24



100018327041

Consignor

Consignee

GTY- Sonapat- 11

DIACARE SOLUTIONS

DCDC HEALTH SERVICES PVT...
CIVIL HOSPITAL, SONIPAT,, 13
1001

Sign | Name | Stamp | Date

Invoice List 1025

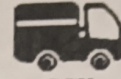
-- 9350101047
MUMBAI@DIACARE@GMAIL.COM

DIM 2-5-18 x 15 x 15

Ewaybills-

Freight Amt.	Credit
Total Inv. Value	46,620.00
Total Nos Of Inv.	1
Pkg/Act Wt	5/35

CREDIT



SCH

State Name : Maharashtra, Code : 27
Contact : 022-49780744,+91-
E-Mail : mumbai@diacaresolutions.com

Consignee(Ship to)

DCDC Health Services Pvt. Ltd

Civil Hospital, Sonapat

Haryana - 131001, India

State Name : Haryana, Code : 06

Contact : 9350101047

Buyer's Order No.

40-102024-28141

Dated

23-Oct-24

Dispatch Doc No.

Delivery Note Date

Dispatched through

Safexpress

Destination

Sonapat

Terms of Delivery

Buyer (Bill to)

DCDC Kidney Care

DCDC Health Services Pvt Ltd, C-185, Mayapuri

Industrial Area phase 2, Mayapuri, New Delhi

-110064, CIN No. - U85190DL2014PTC265804

Delhi - 110064, India

GSTIN/UIN : 07AAFCD0204K1Z1

State Name : Delhi, Code : 07

Contact : 011-45581006

E-Mail : info@dcdc.co.in

SI No.	No. & Kind of Pkgs.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	5 Box	OCI-HD150 Batch : 220423 Expiry : 15-Apr-25	90189031	5 %	120 No 120 No	370.00	No		44,400.00
		IGST (Mumbai)							2,220.00
		Total			120 No				₹ 46,620.00

Amount Chargeable(in words)

E. & O.E

INR Forty Six Thousand Six Hundred Twenty Only

HSN/SAC	Taxable Value	IGST		Total Tax Amount
		Rate	Amount	
90189031	44,400.00	5%	2,220.00	2,220.00
Total	44,400.00		2,220.00	2,220.00

Tax Amount (in words) : INR Two Thousand Two Hundred Twenty Only

Company's PAN : AALFD6060C

Company's Bank Details

A/c Holder's Name : Diacare Solutions

Bank Name : Yes Bank - 062584600001218

A/c No. : 062584600001218

Branch & IFS Code : Dwarka, New Delhi & YESB0000625

SWIFT Code :

Declaration

1) We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct. 2) Interest will charged 24% p.a. if bill paid after due

Stock/No. of Boxes Received for Diacare Solutions

Subject to Physical Check

Name/Employee Code D(0245)

Centre Name Civil Hospital, Sonapat

Date/Time 21/10/24 10 AM

Signature M. No. 8506004422