Mob.: 9873672990

7620

GANESH ENTERPRISES

143 F/F, GALI NO. 14, WEST AZAD NAGAR, EAST DELHI-110051

White : Original For Receipient
Pink : Duplicate For Transporter
Yellow : Triplicate For Supplier

TAX INVOICE

Reverse Charges Yes / No

Invoice No : JMDE/ 288

Invoice Date : 19.06.23

State : Delhi State Code 07

Transportation Name ..... Date .....

GR No. PH NO - 8595955923

Vehicle No. .....

Date of Supply .....

Place of Supply .....

Details of Buyer I Billed to :

Name : DCDC Health Service Pvt Ltd

Address : C-185, Mayapuri industrial Area phase-2

GSTIN : 07AAFCD0204K1Z1

State : New Delhi Code 110064

Details of Consignee I Shipped to :

Name : Nayyar Hospital

Address : 3, Dasonda Singh Rd, Amritsar

GSTIN : .....

State : Amritsar Code 143001

Sr. No.	DESCRIPTION OF GOODS	HSN CODE (GST)	Qty.	Rate	Disc. %	Amount
	Blue Garbage big	3923	10	94		940
	Black Garbage small	3923	15	94		1410

Stock/No. of Boxes Received .....

Subject to Physical Check Vijay Luxmi / PCO 2507

Name/Employee Code Nayyar Hospital

Centre Name Nayyar Hospital

Date/Time 24/6/23 M. No. 8595955923

Signature .....

Total Invoice Value (in Words) 2773

Freight / Packing & Forwarding	
Sub. Total	2350
Add. : CGST @ — %	—
Add. : SGST @ — %	
Add. : IGST @ 18 %	423
Invoice Value	2773

Electronic Reference Number : .....

Date : .....

E.& O. E.

• Terms & Condition : •

1. Goods once sold will not be taken back.
2. All disputes are subject to delhi jurisdiction.
3. 24% Interest per annum will be charged if not paid on 45 days.

Common Seal

Certified that the particulars given above true and correct

For SHRI GANESH ENTERPRISES

Tulasi

Authorised Signatory