

P.M.SURGICAL

KHAJANTI CHOWK FATIMA
ROAD GORAKHPUR 273003
Phone : 9554681519,6386426486
E-Mail : ramsakalsingh2013@gmail.com

**CREDIT GST INVOICE**

GSTIN : 09JGEP9467Q1ZW

UDYAM NO : UDYAM-UP-47-0008828

DL NO : UP5320B002166
UP5321B002166

Invoice : A000216

Date : 23-07-2024

Transport :

CASE : 84

Order No : 9207202426674

Order Date : 04-07-2024

Details of Reciever (Billed to)

Name : DCDC HEALTH SERVICE PVT. LTD.
Address : C-185,MAYAPURI INDUSTRIAL AREA PHASE-2
MAYAPURI NEW DELHI
State & Code: 07-DELHI
Mob No : 8506000148
GSTIN/UIN : 07AAFCD0204K1Z1

Details of Consignee (Shipped to)

Name : DCDC HEALTH SERVICE PVT LTD
Address : DISTRICT HOSPITAL MAHARAJGANJ U.P
Mob No : 7905804581
State & Code : 07-DELHI
GSTIN/UIN : 07AAFCD0204K1Z1

S.	Qty.	Free	Pack	Product	Batch	Exp	HSN	MRP	Rate	DIS	IGST	Amount	
1.	732		1*12	NS 1000ML	S1C40900		30061010	0.00	32.50	0.00	12.00	0.00	23790.00
2.	228		1*12	NS 1000ML	S1C40897		30061010	0.00	32.50	0.00	12.00	0.00	7410.00
3.	200		100ML	NS 100ML KRP	S1M40883		3004	22.03	14.00	0.00	12.00	0.00	2800.00
4.	200		1*100	D25 KRPL	D3M40017		300490	21.25	15.00	0.00	12.00	0.00	3000.00

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

Ram Nath Tripathi

SUB TOTAL 37000.00
IGST 12 % 4440.00
FREIGHT 3000.00

Rs. Forty Four Thousand Four Hundred Forty Only

GRAND TOTAL 44440.00

Terms & Conditions

Goods once sold will not be taken back or exchanged.
Bills not paid due date will attract 24% interest.
All disputes subject to Jurisdiction only.
Prescribed Sales Tax declaration will be given.
Bank : UNION BANK RAPTI NAGAR GKP
A/C NO : 757601010050188 IFSC : UBIN0575020

For P.M.SURGICAL

Authorised signatory