

P.M.SURGICAL

KHAJANTI CHOWK FATIMA
ROAD GORAKHPUR 273003
Phone : 9554681519,6386426486
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CREDIT GST INVOICE

GSTIN : 09JGEP9467Q1ZW
UDYAM NO : UDYAM-UP-47-0008828
DL NO : UP5320B002166
UP5321B002166

Invoice : A000387
Date : 16-10-2024
Transport : LOCAL
CASE : 150

Order No : 10510202427896
Order Date : 04-10-2024

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 CHANDLAULI
Mob No : 7800556678
State & Code : 07-DELHI
GSTIN/UIN : 07AAFCD0204K1Z1

S.	Qty.	Free	Pack	Product	Batch	Exp	HSN	MRP	Rate	DIS	IGST	Amount	
1.	1440		1LTR	NS 1000ML BFS	S1C40515	9/26	300490	0.00	32.50	0.00	12.00	0.00	46800.00
2.	750		1*25	NS 500ML BFS(KRPL)	S1B41368	9/26	3004	0.00	21.00	0.00	12.00	0.00	15750.00

SUB TOTAL **62550.00**
IGST 12 % **7506.00**
FREIGHT **3500.00**
GRAND TOTAL 73556.00

Rs. Seventy Three Thousand Five Hundred Fifty Six Only

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

Stock/No. of Boxes Received 150
Subject to Physical Check Done
Name/Employee Code D.02113
Centre Name D.H. Chandauli, UP.
Date/Time 17/10/24, 3.10 PM
Signature [Signature] M. No. 815409765