

R.C. HEALTH CARE
 Pharmaceutical Distributors
 F7/31 SEC-11 PRATAP VIHAR GHAZIABAD OPP-
 LEELAWATI SCHOOL

Phone : 7838223890
 Licence No. : UP1420B000461/UP1421B000458
 GSTIN : 09AARFR8679M1ZU

GST INVOICE

CREDIT

Invoice No	T0001322	Order No. Order Date	Cases	0
Invoice Date Due Date	29-09-2023 29-09-2023	L.R. No. L.R. Date	Transport	29-09-2023

Party Name :
DCDC KALRA HOSPITAL
 M44P*4VV, KAILASH PARK BASAI DARA PUR, KIRTI
 NEW DELHI.
 09-UP
 PHONE. :

S.	Qty.	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P	Rate	DIS	SGST	CGST	Amount	Net Amount
1.	100	AXA	1*100	D 25% 100ML			3004	47.07	15.00	0.00	6.00	6.00	1500.00	1680.00

Check/No. of Boxes Received 01 Box
 Subject to Physical Check
 Name Employee Code DCDC/11298
 Name DCDC Mat Naym
 Date 29/09/2023
 Signature M. No. 805175583

CLASS	TOTAL	SCHEME	DISCOUNT	SGST	CGST	TOTAL GST	TOTAL
GST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00	1500.00
GST 12.00%	1500.00	0.00	0.00	90.00	90.00	180.00	1680.00
GST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00	
GST 28 %	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL	1500.00	0.00	0.00	90.00	90.00	180.00	1500.00

DIS AMT.	0.00
SGST PAYBLE	90.00
CGST PAYBLE	90.00
CR/DR NOTE	0.00

Rs. One Thousand Six Hundred Eighty Only
 BANK NAME: PNB, A/c no. 3946002100007556, IFSC code: PUNB0394600

Terms & Conditions
 The rate of products is valid only for current Invoice.
 All disputes subject to Jurisdiction only.
 Bills not paid due date will attract 24% interest.

FOR R.C. HEALTH CARE
 [Signature]
 Authorised Signatory

Grand Total
1680.00