

Tax Invoice

(10% ST read with Rule 40)

Domestic Sales Invoice



Poly Medicure Limited

PLDT NO: 33-34, Sector 58, IMT
Faridabad Haryana, India - 121004
Phone: 01293355070 Fax: N/A
Email: plant@polymedicure.com
Mfg Drug License No: MFL/MLI/2018/000032, MFC/MLI/2020/000183
Whole sale Drug License No: RL/2182023HR000464/2002023HR000470

PAN No: AAACP3891P
GSTIN: 06AAACP3891P1ZV
CIN No: L40300DL1999PLC066023
State Code: 06 - Haryana

Customer Purchase Order No./Date: SHOW BELOW

Invoice No & Date : 2415108652 / 26.09.2024
1500556

Name & Address of Customer/Bill to

M/s. DCDC Health Services Pvt. Ltd
C-185, 1st Floor, Mayapuri Industrial Area, Phase-II, New Delhi 110064, Delhi (India)
TEL No: 01145581006, 8506005916 Email: scm@dcdc.co.in
Drug Lic: N/A 31.12.9999
GSTIN: 07AAFC100204K1Z1 PAN: AAFC100204K

Consignee/Ship To
M/s. DCDC Health Services Pvt. Ltd
District Hospital, Dialysis Unit Pilibhit Near Kendriya Vidyalaya, Tanakpur road
Ekta nagar, Pilibhit 262001, Uttar Pradesh (India)
TEL No: 8447444344, Email:
Drug Lic: N/A 31.12.9999
GSTIN: PAN
State Code: 09 - Uttar Pradesh

Payment Terms: Payment Due in 120 Days
Delivery Terms: FOR Delhi
Sales Order: SHOW BELOW
Dnt. No: SHOW BELOW
Payment Method: Normal Sales

Place of Supply: 07 - Delhi
Date of Issue of Invoice: 26.09.2024
Mode of Tpt & Vehicle No: BY ROAD /
Transporter: CCF LOGISTICS SERVICES LLP

Bank Detail: STATE BANK OF INDIA
SME BRANCH, FARIDABAD
A/C NO: 10110101725
IFSC CODE: SBIN0009950

G.R./L.R. No./ Date: 587759

Scan & Pay Using Any UPI App to UPI ID : polymed@sbil

S.No	Description of Goods	HSN Code	No. of Pkg	Quantity NO (s)	Rate/Unit INR	Taxable Value	IGST Rate(%)	IGST Amount
	HAEMOLINE - BLOOD LINE SET POST PUMP B/No 629072411/Mfg: 2024-08, Exp: 2029-07/160,	90183990	4	160.00	84.0000	13,440.00	12	1,612.80
TOTAL						13,440.00		1,612.80
						Taxable Value		1,612.80
						IGST	12%	193.54
						TCS		0.00
						Rounding Off		15,068.34
						Grand Total (INR)		15,068.34

IGST (INR) Rupees One Thousand Six Hundred Twelve And Eighty Paise Only
Grand Total (In INR in Words): Rupees Fifteen Thousand Sixty Eight Only

Remarks: Whether tax is payable on reverse charge: NO

PO No: 89-092024-27388 email dt. 04.09.24/00.00.0000
Sales Order No: 1010345524/06.09.2024
Del No: 8110244052/26.09.24

- Certified that the Particulars stated above are true and correct and the price indicated represents the price actually charged and there is no flow of additional consideration directly or indirectly from the buyer
- Terms & Conditions**
- Interest @ 15% will be charged if payments are made after the due date
 - GST will be applicable on Invoiced Penalty for delayed payments
 - Goods are insured under Marine Cargo upon Policy.
 - Goods once sold will not be taken back
 - All disputes are subject to Faridabad jurisdiction only

IRN: d1870c53349865baaa60164c5b329ae4054ad34703c4adbec016ac5d558

Stock/No. of Boxes: received 4 boxes / 0593
Subject to Physical Check
Name/Employee Code: AC 83664
Centre Name: MLI BWH T
Date/Time: 29/9/24
Signature: Pradyuman Singh
M. No: 6396949928

Prepared By Jagdish

Checked By [Signature]

For Poly Medicure Lim
Authorized Signatory

Poly Medicare Limited

REGD. OFF. No. 33-38, Sector 06, DMC
 Faridabad Haryana, India, 121004
 Phone: 01293355070 Fax: N/A
 Email: plant@polymedicare.com
 Mfg Drug License No: MFG/MD/2018/000032, MFG/MD/2020/000183
 Wholesale Drug License No: RL21B202108000964/208202108000470



PAN No: AAACF0R1P GSTIN: 06AAACF0R1P1ZV
 CIN No: L40300DL1901PLC66023 State Code: 06 - Haryana

Customer Purchase Order No./Date: SHOW BELOW * Invoice No & Date: 2415108651 / 26.09.2024

Name & Address of Customer/Bill to
 1102593
 M/s. DCDC Health Services Pvt. Ltd
 C-183, 1st Floor, Mayapuri Industrial Area, Phase-II, New Delhi 110004, Delhi (India)
 TEL No. 01145581006, 8506005916 Email: som@dcdc.co.in
 Drug Lic. No/A 31.12.9999
 GSTIN: 07AAFC00204K1Z1 PAN: AAFC00204K

Consignee/Ship To 1500556
 M/s. DCDC Health Service Pvt. Ltd
 District Hospital, Dialysis Unit Pilibhit Near Khandriya Vidyalaya, Tamakpur road,
 Ekta nagar, Pilibhit 262001, Uttar Pradesh (India)
 TEL No. 8447444344, Email:
 Drug Lic. No/A 31.12.9999
 GSTIN: PAN
 State Code: 09 - Uttar Pradesh

Payment Terms: Payment Due in 120 Days
Delivery Terms: FOB Delhi
Sales Order: SHOW BELOW *
Del. No: SHOW BELOW *
Payment Method: Normal Sales

Place of Supply: 07 - Delhi
Date of Issue of Invoice: 26.09.2024
Mode of Tpt & Vehicle No. Transporter: BY ROAD / CCF LOGISTICS SERVICES LLP

Bank Detail: STATE BANK OF INDIA
 SME BRANCH, FARIDABAD
 A/C NO. 30410101721
 IFSC CODE: SBIN0009950

G.R.I.R. No / Date: 587759

QR Code for verification:

S.No	Description of Goods	HSN Code	No. of Pkg	Quantity NO (s)	Rate/Unit INR	Taxable Value	IGST Rate (%)	IGST Amount
1	A.V. FISTULA NEEDLE 16 G (DOUBLE PACK) B/No. 84384740 (Mfg. 2024-08, Exp. 2029-07) (250)	90183990	1	250.00	18.5400	4,635.00	12	556.20
2	A.V. FISTULA NEEDLE 17G (DOUBLE PACK) B/No. 84503240 (Mfg. 2024-09, Exp. 2029-08) (250)	90183990	1	250.00	18.5400	4,635.00	12	556.20
TOTAL			2	500.00		9,270.00		1,113.60

Net Taxable Value	9,270.00	IGST @ 12%	1,113.60	Grand Total (INR)	10,383.60
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Remarks: Whether tax is payable on reverse charge: NO
 PLS No: 894092024-27388 email: dc, 04 09 24/00 00 0000
 Sales Order No.: 1017045724-06-09-2024
 Del No.: 8119344051/26-09-24

I declare that the Particulars stated above are true and correct and the price indicated represents the price actually charged and there is no flow of additional consideration directly or indirectly from the buyer to the seller.

1. Interest @ 18% will be charged if payments are made after the due date.
 2. GSTC will be applicable on Invoiced Penalty for delayed payment.
 3. Goods are insured under Marine Cargo open Policy.
 4. Goods once used will not be taken back.
 5. All disputes are subject to Faridabad jurisdiction only.

Stock/No. of Boxes: received 2
 Subject to Physical Check 2603667
 Name/Employee Code: P115672
 Centre Name: 39/9/24
 Date/Time: 26/9/24
 Signature: Jagdish Jang
 M. No: 6348949920
 10592

QR Code for verification:

Prepared By Jagdish

Checked By

For Poly Medicare Limited

Authorised Signatory

Regd Office: 232B, 3rd FLOOR, OKHLA INDUSTRIAL ESTATE PHASE - III, NEW DELHI - 110020, INDIA

Phone: 011-26321838, 33550700 Fax: 26321894/39 Email: customercare@polymedicare.com, info@polymedicare.com Website: www.polymedicare.com