

GST INVOICE

SHREE BHAGYAVANTI PHARMA & SURGICAL DISTRIBUTOR  
 SHOP NO 74 NEAR VISHWESHVARAYYA CIRCLE  
 OPP INDRAN CANTEN BAGALKOT ROAD VIJAYAPUR

DCDC HEALTH SERVICE PVT. L  
 TALUKA HOSPITAL, YALLAPUR

29-KARNATAKA  
 PHONE : 9686989388

Phone : 8123110594  
 D.L.No. : KA-BJ-208-21B-192923/24  
 GSTIN : 29AEDFS9549F1Z4

DUE DATE : 18-06-2024

Inv No : A000350  
 Inv. Date : 18-06-2024  
 Transport :  
 Mobile no :  
 L.R. NO :  
 L.R. Dt : 18-06-2024  
 No of BOXS : 0  
 PO NO : 199-062024-26246  
 PO DATE : 04-06-2024

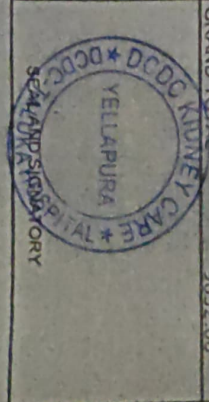
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 SHOP NO 74 NEAR VISHWESHVARAYYA CIRCLE  
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 Inv. Date : 18-06-2024

SL	MFR	Qty	Pack	Item Description	Batch	Exp.	HSN Code	M.R.P	Rate	Dis %	SGST	Value	CGS	Value	Amount
1	ABAR	400	1*500M	ABARIS NS	D124002037	3/27	30045020	34.83	21.50	0.0	6.00	516.00	6.00	516.00	9632.00
TOTAL ITEMS :				111	TOTAL QTY :	400	0.00								
CLASS		SUB TOTAL		SCHEME DISCOUNT		SGST		CGST		TOTAL GST		SUB TOTAL		8600.00	
GST 5.00%		0.00		0.00		0.00		0.00		0.00		DISCOUNT		0.00	
GST 12.00%		8600.00		0.00		516.00		516.00		1032.00		SGST PAYABLE		516.00	
GST 18.00%		0.00		0.00		0.00		0.00		0.00		CGST PAYABLE		516.00	
GST 28 %		0.00		0.00		0.00		0.00		0.00		CRDR NOTE		0.00	
SUB TOTAL		8600.00		0.00		516.00		516.00		1032.00		GRAND TOTAL		9632.00	

SUB TOTAL		8600.00	
DISCOUNT		0.00	
SGST PAYABLE		516.00	
CGST PAYABLE		516.00	
CRDR NOTE		0.00	
GRAND TOTAL		9632.00	

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.  
 BANK DETAILS: BANK NAME: KOTAK BANK  
 A/C : 8123110594 || IFSC : KKBK0008234

Stock No. of Boxes Received : 16 Box  
 Subject to Physical Check  
 Name/Emp : T. H. Yellapur  
 Centre Name : Yellapur  
 Date : 17/06/2024  
 Authorised signatory



Sig: *[Signature]* 819215685