|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **SWASTI DRUG DISTRIBUTORS** | | | | | | | |
| **LACHIT NAGAR,PATHSALA,BARPETA** | | | | | | | |
| **ASSAM** | | | | | | | |
| **Phone : 03666266016/9435243479** | | | | | | | |
| **E-Mail : jibikaswasti@gmail.com** | | | | | | | |
| **Licence No. : BPT/13565/13566** | | | | | | | |
| **TIN No. : 18360015952 PAN NO : AFUPS5472H** | | | | | | | |
| **Purchase Order** | | | | | | | |
| **D.L. No.:BPT/13565/13566** | | **TIN:18360015952 PAN NO : AFUPS5472H CST No;-13565/13566** | | |  | | |
| **M/s PEAK AGENCICES** | |  |  | **ORDER No ;- SDD/02297** |  |  | |
| **CITY TOWER,1ST FLOOR** | |  |  | **DATE :-25/03/2017** |  |  | |
| **S.C GOSWAMI ROAD,PANBAZAR,GHY.** | |  |  |  |  |  |
| **GUWAHATI-781001(ASSAM).** | |  |  |  |  |  |
| **CST No. : 18199909886** | |  |  |  |  |  |
| **D.L. No : KMP/16220/21** | |  |  |  |  |  |
| **SNo** | **Particulars** | **Packing** | **Company** | **Quantity** | **Free** |  |
| **1** | **Rabiwin DRS** | **10’s** | **WAVE PHARMA** | **500** | **100** |  |
| **2** | **Hepawin Infussion** | **1’s** | **WAVE PHARMA** | **100** | **20** |  |
| **3** | **Nimesel P tab** | **1’s** | **WAVE PHARMA** | **100** | **20** |  |
| **4** | **Wavocef T inj.** | **1 vails** | **WAVE PHARMA** | **100** | **30** |  |
| **Authorized Signatory**  **SWASTI DRUG DISTRIBUTOR** | | | | | | |
| **Authorized Signatory** | | | | | | |
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