

ROTARY AMBALA MEDICAL STORE							Purchase Order						
							Vendor Address						
ROTARY AMBALA MEDICAL STORE Opp. Dussehra Ground, Ram Bagh Road, Ambala Cantt. Mobile No. : 7496956703,7082840888 GSTIN No. : 06AABAR5319R1Z1				PO No.		PO-22-3994		Khattar Pharma 746,DC ROAD, AMBALA CANTT, HARYANA 0171-261816					
				PO Date		2022-03-03							
				Ref. No.		27030322							
S.No.	Description of Goods	HSN Code	Pack Size	No. of Packs	Qty in Units	Unit Price	Total	Discount	Taxable Amt	CGST		SGST	
										Rate	Amt	Rate	Amt
1	FLUTIWIN CREAM 15GM	3004	1	5.0	5	82.8	414.0		414.0	6	24.84	6	24.84
2	TEMPTIN LOTION 60 ML	3004	1	5.0	5	236.3	1181.5		1181.5	9	106.335	9	106.335
3	ONITRAZ CAPSULES 100MG	3004	10	30.0	300	15.15	4545.0		4545.0	6	272.7	6	272.7
4	MELAPIK - HQ CREAM 20GM	3004	1	5.0	5	79.36	396.8		396.8	6	23.808000000000003	6	23.808000000000003
5	LOZIVATE -MF OINMENT 30GM	3004	1	15.0	15	97.39	1460.85		1460.85	6	87.65100000000001	6	87.65100000000001
6	CINATOP CREAM 60 GM	3004	1	25.0	25	162.32	4058.0		4058.0	6	243.48	6	243.48
7	SUNBLESS 30G	3004	1	5.0	5	338.94	1694.7		1694.7	9	152.523	9	152.523
8	ITIN-12	3004	1	15.0	15	37.51	562.65		562.65	6	33.759	6	33.759
9	ZYDIP-C LOTION	3004	1	5.0	5	97.39	486.95		486.95	6	29.217	6	29.217
10	MELAPIK EVER	3004	1	5.0	5	109.66	548.3		548.3	6	32.897999999999996	6	32.897999999999996
11	LULIZOL CREAM 30 GM	3004	1	15.0	15	187.57	2813.55		2813.55	6	168.813	6	168.813
12	KLMITE CREAM	3004	1	20.0	20	83.83	1676.6		1676.6	6	100.59599999999999	6	100.59599999999999
13	FEXERT-180 TAB	3004	10	50.0	500	10.1	5050.0		5050.0	6	303	6	303
14	CLOTAM B CREAM	3004	1	15.0	15	82.89	1243.35		1243.35	6	74.60099999999998	6	74.60099999999998
15	CANDIBIOTIC E/D 5ML	3004	1	20.0	20	58.44	1168.8		1168.8	6	70.128	6	70.128
16	NOKVER 100MG	3004	10	40.0	400	12.108	4843.2		4843.2	6	290.592	6	290.592

Terms & Conditions :	You will get your cheque by 20th of the next month					
Warranty/ Guarantee:	N.A.				Sub Total	32144.25
Transport Terms:					Total Tax	4029.89
Payment Terms:					Total	36174.14
Important : Please mention the following information on invoice: 1) Our P.O. No. & Date 2) Our GSTIN No.		Order By		Checked By		Approved By