

**TAX INVOICE**

RECIPIENT

e-Invoice

(ORIGINAL FOR RECIPIENT)

**Gautam Healthcare Private Limited**

248, First Floor, Cycle Mkt,  
Jhandewalan Extension,  
New Delhi-110 055  
9811116228  
AAECG9710C  
DL Number-DL-MTM-145471 DT 22.06.2021  
GSTIN/UIN: 07AAECG9710C1ZV  
State Name : Delhi, Code : 07  
CIN: U85100DL2011PTC227049  
E-Mail : vivek@gautamhealthcare.com

Consignee (Ship to)

**DCDC Health Services Private Limited**

Jeevan Jyoti Hospital  
JEEVAN JYOTI HOSPITAL 2ND FLOOR, DARRIPARA, RING ROAD,  
AMBIKAPUR, DIST- SURGUJA, 497001  
Contact No : 8359090110  
State Name : Chhattisgarh, Code : 22

Buyer (Bill to)

**DCDC Health Services Private Limited**

C-185, Mayapuri Industrial Area  
Phase-II  
Mayapuri  
New Delhi-110064  
State Name : Delhi, Code : 07

Invoice No. <b>GST/24-25/768</b>	e-Way Bill No. <b>841444233131</b>	Dated <b>31-Aug-24</b>
Delivery Note	Mode/Terms of Payment <b>30 Days</b>	
Reference No. & Date.	Other References	
Buyer's Order No. <b>226-062024-24-1</b>	Dated <b>13-Aug-24</b>	
Dispatch Doc No.	Delivery Note Date	
Dispatched through	Destination	

Terms of Delivery

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Dialysis Machine Dora 6000</b> Batch : 230801001142 Batch : 230801001143	90189031	2 pcs	4,86,300.00	pcs	9,70,600.00
			1 pcs			
			1 pcs			
		<b>CGST</b>				24,265.00
		<b>SGST</b>				24,265.00
	<b>Total</b>		2 pcs			10,19,130.00 ₹

Stock/No. of Boxes Received ..... 2 .....  
Subject to Physical Check  
Name/Employee Code ..... Vivek Singh .....  
Centre Name ..... J.J. Hospital Ambikapur .....  
Date/Time ..... 05/09/24 11:20 AM .....  
Signature ..... [Signature] ..... M. No. 6202873068

Amount Chargeable (in words) **Ten Lakh Nineteen Thousand One Hundred Thirty INR Only** E. & O.E

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total
		Rate	Amount	Rate	Amount	
90189031	9,70,600.00	2.80%	24,265.00	2.60%	24,265.00	48,630.00
<b>Total</b>	9,70,600.00		24,265.00		24,265.00	48,630.00

Tax Amount (in words) : **Forty Eight Thousand Five Hundred Thirty INR Only**

Company's PAN : **AAECG9710C**

Company's Bank Details  
A/c Holder's Name : **Gautam Healthcare Private Limited**  
Bank Name : **IDBI BANK CC A/C**  
A/c No. : **1735651100001427**  
Branch & IFS Code : **Chawri Bazar & IBKL000TFS5**

Declaration  
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

for Gautam Healthcare Private Limited  
[Signature]  
Authorized Signatory

