

**Tax Invoice**

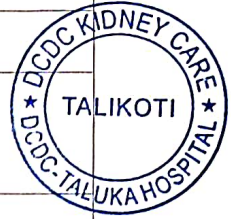
(ORIGINAL FOR RECIPIENT)

Head office/Registered Address  
**MARUTI AGENCY**  
 FIRST FLOOR, CTSNO. 3812/2B/44B,  
 MARUDHAR KESARI, NEW BUS STAND ROAD,  
 BESIDE YAMAHA SHOWROOM, GADAG -582101  
 {KARNATAKA}, 9448482952 / 9886644952,  
 GSTIN/UIN: 29BDNPP1212L1Z9, State Name :  
 Karnataka, Code : 29, , ,

Invoice No. **HBL/MA425/24-25**  
 Dated **25-Oct-24**  
 Mode/Terms of Payment  
**IMMEDIATE**  
 Reference No. & Date.  
 Other References

Billing Address  
**MARUTI AGENCY**  
 KSCMF LTD BUILDING, GODOWN NEW NO.8/C  
 #39/626, GINNING & PRESSING COMPOUND  
 VIKAS NAGAR  
 AT: HUBBALLI - 580021  
 9886644952  
 GSTIN/UIN: 29BDNPP1212L1Z9  
 State Name : Karnataka, Code : 29

Buyer's Order No.  
**P.O No. : 213-092024-77-1**  
 Dated **20-Sep-24**  
 Terms of Delivery  
**ANAND GOODS CARRIER**  
**9980380575**  
**FRIGHT CHARGE PAID**



Bill To  
**DCDC HEALTH SERVICES PVT. LTD.**  
 C-185, 1ST FLOOR,  
 MAYAPURI INDUSTRIAL AREA, PHASE-II  
 NEW-DELHI -110064  
 Contact :  
 E-Mail :  
 Buyer's GSTIN/UIN :

Ship To  
**DCDC HEALTH SERVICES PVT. LTD.**  
 Taluka Hospital Talikoti  
 Taluka General Hospital Talikoti, Dist. Vijayapura, 586214  
 Contact No : 7406820897  
 State Name : Karnataka, Code : 29

Sl No	Description of Goods	HSN/SAC	Quantity	Rate (Incl. of Tax)	Rate	per	Disc. %	Amount
	<b>CANDY REF 185L CSD -1952RS</b> BS00UA0AH01T1Q73F6FM	84182100	<b>1 NOS</b>	12,700.00	10,762.71	NOS		<b>10,762.71</b>
	<b>IGST</b>							<b>1,937.29</b>
<b>Total</b>			<b>1 NOS</b>					<b>₹ 12,700.00</b>

Stock/No. of Boxes Received ..... 01 .....  
 Subject to Physical Check ..... 01 .....  
 Name/Employee Code ..... DC93776 .....  
 Centre Name ..... Lawanya Nagani .....  
 Date/Time ..... 28/10/24 .....  
 Signature ..... S. Nagani ..... M. No. 9148994109

Amount Chargeable (in words) **INR Twelve Thousand Seven Hundred Only** E. & O.E

HSN/SAC	Taxable Value	IGST		Total Tax Amount
		Rate	Amount	
84182100	10,762.71	18%	1,937.29	1,937.29
<b>Total</b>			<b>1,937.29</b>	<b>1,937.29</b>

Tax Amount (in words) : **INR One Thousand Nine Hundred Thirty Seven and Twenty Nine paise Only**

Company's Bank Details  
 Bank Name : ICICI BANK LTD OD A/c  
 A/c No. :  
 Branch & IFS Code:

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

For **MARUTI AGENCY**  
**MARUTI AGENCY**  
 KSCMF Ltd Building, Godown New No. 8/C,  
 #39/626, Ginning & Pressing Compound,  
 Vikas Nagar, HUBBALLI-580 021.