

BOOK 1

paid

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. e-Way Bill No Dated  
 HBL/MA431/24-25 171968426044 25-Oct-24  
 Mode/Terms of Payment  
**IMMEDIATE**  
 Reference No. & Date. Other References  
 Buyer's Order No Dated  
 P.O No. : 212-102024-115-1 22-Oct-24  
 Terms of Delivery  
**SRI BASAVA EXPRESS**  
 Ship To  
**DCDC HEALTH SERVICES PVT. LTD.**  
**Taluka Hospital Nidagundi**  
**Taluka General Hospital Nidgundi,**  
**Dist. Vijayapura, 586213**  
**Contact No : 7406820897**  
 State Name : Karnataka, Code : 29

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

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 :

Sl No	Description of Goods	HSN/SAC	Quantity	Rate (Incl. of Tax)	Rate	per	Disc. %	Amount	
1	CANDY REF 185L CSD -1952RS BS00UA0AH01T1Q71HDVE	84182100	1 NOS	12,700.00	10,762.71	NOS		10,762.71	
	IGST							1,937.29	
Total								1 NOS	₹ 12,700.00



paid

Stock/No. of Boxes Received ..... 01  
 Subject to Physical Check .....  
 Name/Employee Code .....  
 Centre Name .....  
 Date/Time ..... 24-10-24  
 Signature .....  
 8431100218

MATERIAL OUTWARD

Delivered Date :  
 Transport Name :  
 Vehicle Number :  
 Delivered By :  
 Sign :

Amount Chargeable (in words)  
**INR Twelve Thousand Seven Hundred Only**

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

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 B/C  
 #39/626, Ginning & Pressing Compound  
 Vikas Nagar, Hubballi - 580021

SUBJECT TO CADAC JURISDICTION  
 This is a Computer Generated Invoice