

TAX INVOICE (Original for the Receipient)

®DCDC Health Services Private Limited . .

DCDC Kidney Care Dialysis Centre Awadh Hospital Alambagh Lucknow Uttar Pradesh India

Uttar Pradesh

India 226005

Home: 8299073411

Mobile :

User Id: 119686492620 Account No: 119686492620 Invoice No.: UP-B1-115140222 GSTIN: 07AAFCD0204K1Z1

ATRIA CONVERGENCE TECHNOLOGIES LIMITED. 2nd Floor, TC/G-2/2 and TC/G-5/5,

Cyber heights, Vibhuti Khand, Gomti Nagar,

Lucknow, UP - 226010 Ph.No: 9121212121,7288999999

E-mail: helpdesk@actcorp.in GSTIN: 09AACCA8907B1ZW

Billing Period	Invoice Date	Amount Payable	Due Date	Amount After Due Date	
Feb, 2024	01/02/2024	₹883.82	15/02/2024	₹983.82	PAY BILL

Account Summary				
Previous Due (A)	₹883.82			
Invoice Amount (B)	₹883.82			
Adjustments (C)	₹0			
Payments Received (D)	₹883.82			
Balance Amount (A+B-C-D)	₹883.82			

This Month's	Summary
Total Charges	₹749.00
CGST	₹67.41
SGST	₹67.41
Total	₹883.82



Invoice Charges

Account No: 119686492620 User Name:119686492620

Plan Name From Date		To Date	Quantity	Rental	Net Amount
LKN ACT Silver-1M	01/02/2024	29/02/2024	29 days	749	749

Sub Total: 749

Tax Details

Account No: 119686492620 User Name:119686492620

Plan Name	HSN Code	Taxable Amount	CC	CGST		SGST	
Flati Name		Taxable Alliount	Rate %	Amount	Rate %	Amount	Total Tax
LKN ACT Silver-1M	998422	749	9	67.41	9	67.41	134.82
			Sub Total:	67.41		67.41	134.82

INVOICE AMOUNT: 7-	49 67.41	67.41	883.82
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Payments Received

Account No: 119686492620 User Name:119686492620

RefNo	Txn Date	Details	Amount	Total Remarks		
P1-69981931	15/01/2024	Payment: Online Mode	883.82	883.82 UPIINTENTPayment for subscriber - 119686492620		
			Payments :	883.82		
					Total Payments :	883.82

Terms and Conditions

- 1. 18% interest will be levied on overdue payments.
- 2. ACT Shall levy late fee charge in case the bill is paid after the due date.
- 3. In case of overdue/ defaults, the right to deactivate your services, is reserved.
- 4. All disputes are subject to Uttar Pradesh jurisdiction.
- ${\bf 5.} \ \ {\bf Unless \ otherwise \ stated,} \\ {\bf tax \ on \ this \ invoice \ is \ not \ payable \ under \ reverse \ charge.}$
- 6. This Invoice is system generated hence signature and stamp is not required.

Refer more, earn more!

Referral= Rewards. Get 25% off on your next bill!

Share the ACT advantage get rewarded.

https://www.actcorp.in/refer

