

# TAX INVOICE

ORIGINAL for RECIPIENT

No:- 0090089956 | Issue Date 09.12.2022

## Alliance Broadband Services Pvt. Ltd.

City: Ranchi

Address: 301, MANGAL TOWER, KANTATOLI, RANCHI, Ranchi, Jharkhand, 834001

PAN No: AAECA3151B

GST No: 20AAECA3151B1Z0

State: Jharkhand code: 20

SAC No: 998422

Phone: 033-71002000, Toll Free No: 1800 1200 300 www.alliancebroadband.co.in

## TO: DCDC Health Services Private Limited

Address: Sadar Hospital, Dumka, Jharkhand, Pin-814101 8210471453

State: Jharkhand code: 20

No	Description of goods or services	amount
1	fee "STARTER" (10.12.2022 to 08.01.2023)	500.000
	TOTAL AMOUNT	500.00
	CGST (9%)	45.00
	SGST (9%)	45.00
	TOTAL	590.00
	Rounded off	590.00

IN WORDS: INR Five hundred and ninety rupee

Payment method:  Cheque  D.D/P.O.  Cash

Date of occurrence of chargeable event / payment: 09.12.2022 / 09.12.2022

### TERMS AND CONDITIONS

- 1) It will be deemed that you have accepted this Invoice in full in the event you have not lodged any written objection with us within 20 days of receipt of this Invoice.
- 2) To avoid disconnection of service you are requested to pay the full amount by the due date mentioned in the invoice. An interest of 18% per annum will be charged on the amount remaining unpaid after the due date.
- 3) All Cheques, Demand Drafts in payment of Invoice should be drawn in favour of "Alliance Broadband Services Pvt. Ltd."
- 4) Kindly mention invoice number along with your payment to ensure correct and timely processing.
- 5) Cheque Return Charges of Rs. 250 would be charged extra.
- 6) E-Invoice will be generated within 48 hours, wherever applicable.
- 7) E. & O. E.

Issuer: ABSPL\_Layman's Cable & Broadband Networks[Jharkhand]-03

Janendra Singh

Receiver:

Client ID: 122224135278

Authorised Signatory:



Authorised Signatory

### Additional user details:

Username: dcdc\_lcbn

IP Address: 10.16.175.31

Zone: Layman's Cable & Broadband Networks[Jharkhand]-03

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### REMITTANCE SLIP

PAYMENT DETAILS: (Please Tick) Mode of Payment  Cheque  Demand draft  Cash

Cheque/DD No.	Name of the Bank	Branch	Date	Amount(Rs.)
				590.00

User ID: dcdc\_lcbn Customer's name: DCDC Health Services Private Limited

Invoice No.:	Invoice Date	Expiry Date
0090089956	09.12.2022	08.01.2023

Customer's Signature

Channel Partner's Seal

