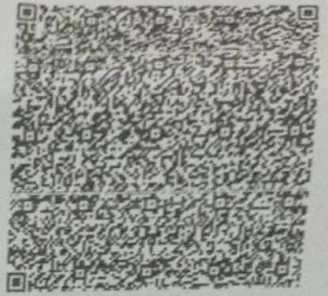


Tax Invoice

(ORIGINAL FOR RECIPIENT)

e-Invoice



IRN : 728fb4b057b0299bb18da86766bd1150e5088d8712eb-d1ec70949edb3dd7ec37
 Ack No. : 172414177863544
 Ack Date : 8-Jan-24

ANCHOR FAB
 B - 4/2, Okhla Industrial Area, Phase-II, New Delhi-11
 GST NO. 07ABAPS2131D1Z7
 ISO 9001:2015
 Delhi - 110020, India
 GSTIN/UIN: 07ABAPS2131D1Z7
 State Name : Delhi, Code : 07
 E-Mail : pulkit77@hotmail.com
 Consignee (Ship to)

DCDC Health Services Pvt Ltd.
 PHC, ZAFFERGHAD JANGAON DISTT, TELANGANA
 Telangana - 506316, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Telangana, Code : 36
 Buyer (Bill to)

DCDC Health Services Pvt Ltd.
 C-185, 1st Floor, Mayapuri Industrial, Area, Phase
 -2, New Delhi.
 Delhi - 110064, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

Invoice No.	Dated
AF/741/23-24	8-Jan-24
Delivery Note	Mode/Terms of Payment
Reference No. & Date.	Other References
Buyer's Order No.	Dated
124-012024-24718	5-Jan-24
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
	ZAFFERGHAD WARANGAL
Bill of Lading/LR-RR No.	Motor Vehicle No.
	DL03CCH0214
Terms of Delivery	

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	SKY BLUE SCRUB SUIT MEDIUM BLUE UNIFORM MEDIUM	620429	4 Set	400.00	Set	1,600.00
2	UNIFORM PANT SHIRT SET PANT-SHIRT SET FEMALE MEDIUM SIZE	620429	2 Set	850.00	Set	1,700.00
						3,300.00
						82.50
						82.50
Total						6 Set
						₹ 3,465.00

SGST 2.5%
 CGST 2.5%

Stock/No. of Boxes Received **1**
 Subject to Physical Check
 Name/Employee Code **M. Pravalika**
 Centre Name : Zafferghad
 Date/Time : **19/01/2024**
 Signature : **[Signature]** M. No. **7.0134.50233**

Amount Chargeable (in words) **INR Three Thousand Four Hundred Sixty Five Only** E. & O.E

Taxable Value	Central Tax		State Tax		Total Tax Amount
	Rate	Amount	Rate	Amount	
3,300.00	2.50%	82.50	2.50%	82.50	165.00
Total:		82.50		82.50	165.00

Tax Amount (in words) : **INR One Hundred Sixty Five Only**

Remarks:
 BILL NO 741

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

Company's Bank Details
 A/c Holder's Name : **ANCHOR FAB**
 Bank Name : **HDFC BANK LTD**
 A/c No. : **03372020000609**
 Branch & IFS Code : **MAA ANANDMAYI MARG OKHLA/INDL PH-2 & HDFC0000337**
 for **ANCHOR FAB**

Customer's Seal and Signature

Prepared by _____ Verified by _____ Authorized Signatory

