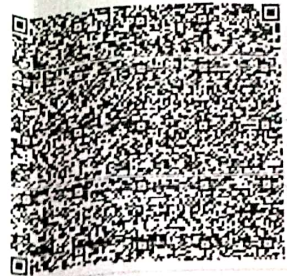


**Tax Invoice**

(DUPLICATE FOR TRANSPORTER)

e-Invoice



IRN : d4ab71c482e33b7bd2b1e756e9727589d3f3f4592e608-1c6ac9f96658db0fdc9  
 Ack No. : 172314061149890  
 Ack Date : 20-Dec-23

**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.**  
 DIST. HOSPITAL FIROZABAD, ARYA NAGER  
 FIROZABAD  
 Uttar Pradesh - 283203, India  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Uttar Pradesh, Code : 09  
 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.  
**AF/674/23-24**  
 Delivery Note

Dated  
**20-Dec-23**  
 Mode/Terms of Payment

Reference No. & Date.

Other References

Buyer's Order No.  
**65-122023-24410**  
 Dispatch Doc No.

Dated  
**7-Dec-23**  
 Delivery Note Date

Dispatched through

Destination  
**FIROZABAD**  
 Motor Vehicle No.  
**DL03CCH0214**

Bill of Lading/LR-RR No.

Terms of Delivery

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
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1	<b>UNIFORM PANT SHIRT SET</b> SHIRT & TROUSER FEMALE MEDIUM	620429	2 Set	850.00	Set	1,700.00
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Stock/No. of Boxes Received .....  
 Subject to Physical Check .....  
 Name/Employee Code .....  
 Centre Name .....  
 Date/Time .....  
 Signature .....

Stock/No. of Boxes Received ..... 7 ..... 42.50  
 Subject to Physical Check ..... Uniform ..... 42.50  
 Name/Employee Code ..... 172314061149890 .....  
 Centre Name ..... FIROZABAD .....  
 Date/Time ..... 23/12/23 11:35 .....  
 Signature ..... M. No. 7030073955

Total 2 Set ₹ 1,785.00  
 E. & O.E

Amount Chargeable (in words)  
**INR One Thousand Seven Hundred Eighty Five Only**

Taxable Value	Central Tax		State Tax		Total Tax Amount
	Rate	Amount	Rate	Amount	
1,700.00	2.50%	42.50	2.50%	42.50	85.00
<b>Total:</b>		42.50		42.50	85.00

Tax Amount (in words) : **INR Eighty Five Only**

Remarks:  
 BILL NO 674  
 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 ANANOMAYI MARG OKHALA INDL PH-2 & HDFC0000337**

Customer's Seal and Signature

Prepared by \_\_\_\_\_ Verified by \_\_\_\_\_



This is a Computer Generated Invoice