

Tax Invoice Cum Delivery Challan

e-Invoice



IN : 6c89be8fdc3c2ce0a6293253ce17c4dfad6de1-0834408d74be96d19ed1bc6444  
 ck No. : 182314156239618  
 ck Date : 11-Aug-23

**ARIVATION HEALTHCARE PRIVATE LIMITED**  
 Site Office: 16/24 Cr. Suresh Chandra Banerjee Road  
 KOLKATA Kolkata WB  
 KOLKATA-700010  
 GSTIN/UIN: 19AASCA6131H1ZF  
 State Name : West Bengal, Code : 19  
 Contact : 6289556902,9836667979  
 E-Mail : arivationhealthcare@gmail.com  
 www.arivation.com

Consignee (Ship to)  
**DCDC Health Service Pvt. Ltd.**  
 DCDC Kidney Care-Moti Nagar, H-1, Kailash  
 Park, Near Moti Nagar Metro Station, Pillar  
 No-330, New Delhi- 110015, Contact No : 8840000500  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Other Territory, Code : 97

Buyer (Bill to)  
**DCDC Health Service Pvt. Ltd.**  
 C-185, Mayapuri Industrial Area phase- 2,  
 Mayapuri, New Delhi-110064  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Other Territory, Code : 97  
 Place of Supply : Other Territory

|                          |                           |                       |                  |
|--------------------------|---------------------------|-----------------------|------------------|
| Invoice No.              | <b>AHPL/2324/195</b>      | Dated                 | <b>11-Aug-23</b> |
| Delivery Note            |                           | Mode/Terms of Payment | <b>30 DAYS</b>   |
| Reference No. & Date.    |                           | Other References      |                  |
| Buyer's Order No.        | <b>100-082023-23507-1</b> | Dated                 | <b>9-Aug-23</b>  |
| Dispatch Doc No.         |                           | Delivery Note Date    |                  |
| Dispatched through       | <b>DELHIVERY</b>          | Destination           | <b>DELHI</b>     |
| Bill of Lading/LR-RR No. | <b>dt. 11-Aug-23</b>      | Motor Vehicle No.     |                  |
| Terms of Delivery        |                           |                       |                  |

| SI No.       | Description of Goods | HSN/SAC  | Quantity | Rate   | per | Disc. % | Amount      |                   |
|--------------|----------------------|----------|----------|--------|-----|---------|-------------|-------------------|
| 1            | Antiscalant 5L JAR   | 38249022 | 8 KG     | 600.00 | KG  |         | 4,800.00    |                   |
|              | <b>Igst Output</b>   |          |          |        |     |         | 864.00      |                   |
| <b>Total</b> |                      |          |          |        |     |         | <b>8 KG</b> | <b>₹ 5,664.00</b> |

2 BOX  
 Stock/No. of Boxes Received .....  
 Subject to Physical Check .....  
 Name/Employee Code .....  
 Centre Name .....  
 Date/Time .....  
 Signature .....  
 M. No. 805 755839

Amount Chargeable (in words)  
**Indian Rupees Five Thousand Six Hundred Sixty Four Only**

| Taxable Value          | IGST |               | Total Tax Amount |
|------------------------|------|---------------|------------------|
|                        | Rate | Amount        |                  |
| 4,800.00               | 18%  | 864.00        | 364.00           |
| <b>Total: 4,800.00</b> |      | <b>864.00</b> | <b>364.00</b>    |

Tax Amount (in words) : **Indian Rupees Eight Hundred Sixty Four Only**

Declaration  
 DL No: WB/KOL/NBO/W/320645 & WB/KOL/BO/W/320645  
 MSME UAM No. WB10DU023343

Company's Bank Details  
 Bank Name : **Union Bank of India**  
 A/c No. : **015225010000001**  
 Branch : **Dharmatolla Branch & UBIN0901521**  
 Dharmatolla Branch & UBIN0901521