

**TAX INVOICE**

(ORIGINAL FOR RECIPIENT)

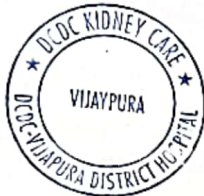
**Gautam-Healthcare-Private Limited**  
 248, First Floor, Cycle Mkt,  
 Jhandewalan Extension,  
 New Delhi-110 055  
 PAN: AAECG9710C  
 DL Number-DL-MTM-146471 DT 22.06.2021  
 GSTIN/UIN: 07AAECG9710C1ZV  
 State Name : Delhi, Code : 07  
 CIN: U85100DL2011PTC227049  
 E-Mail : vivek@gautamhealthcare.com

Invoice No. <b>GST/24-25/398</b>	Dated <b>20-Jun-24</b>
Delivery Note	Mode/Terms of Payment <b>30 Days</b>
Reference No. & Date.	Other References
Buyer's Order No. <b>165-062024-26273</b>	Dated <b>1-Jun-24</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination

Consignee (Ship to)  
**DCDC Health Services Private Limited**  
 DH Vijaypura  
 VIJAPURA DISTRICT HOSPITAL, Dialysis unit,  
 Athani Road,  
 KARNATAKA-586101  
 Contact No : 7204956782  
 State Name : Karnataka, Code : 29

Buyer (Bill to)  
**DCDC Health Services Private Limited**  
 C-185, Mayapuri Industrial Area  
 Phase-II  
 Mayapuri  
 New Delhi-110064  
 State Name : Delhi, Code : 07

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>AVF2516LF01E Vital 16G</b> Batch : 2402150113 Expiry : 8-May-26	90183990	1,000 pcs	11.50	pcs	11,500.00
2	<b>AVF2517LF01E Vital G17</b> Batch : 2302150042 Expiry : 12-Mar-26	90183990	1,000 pcs	11.50	pcs	11,500.00
						23,000.00
						<b>1,380.00</b>
						<b>1,380.00</b>
<b>Total</b>						<b>25,760.00 ₹</b>



**3 BOX**

**58x42x29**

Stock/No. of Boxes Received ..... **03** .....  
 Subject to Physical Check **03**  
 Name/Employee Code **Basavara.patil 103374**  
 Centre Name **Vijaypura DH**  
 Date/Time **26/06/24**  
 Signature **[Signature]** M. No. **7204956782**

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

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90183990	23,000.00	6%	1,380.00	6%	1,380.00	2,760.00
<b>Total</b>	<b>23,000.00</b>		<b>1,380.00</b>		<b>1,380.00</b>	<b>2,760.00</b>

Tax Amount (In words) : **Two Thousand Seven Hundred Sixty INR Only**

Company's PAN : **AAECG9710C**  
 Declaration : I/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 : **Gautam Healthcare Private Limited**  
 Bank Name : **Axis Bank Limited**  
 A/c No. : **917020076226068**  
 Branch & IFS Code : **Jhandewalan Extension & UTIB000738**  
 for Gautam Healthcare Private Limited



This is a Computer Generated Invoice