

TAX INVOICE

(ORIGINAL FOR RECIPIENT)

Gautam Healthcare Private Limited

248, First Floor, Cycle Mkt
Jhandewalan Extension,
New Delhi-110 055
3811116228

AAECG9710C
DL Number-DL-MTM-145471 DT 22.06.2021
GSTIN/UIN: 07AAECG9710C1ZV
State Name : Delhi, Code : 07
CIN: U85100DL2011PTC227049
E-Mail: vivak@gautamhealthcare.com

Consignee (Ship to)

DCDC Health Services Private Limited

District Hospital Sant Ravidas Nagar
100 BEDS HOSPITAL Jila Mukhyalaya sarpatha ,gyanpur
sant Ravidas Nagar / Bhadoi, 221304
Contact No : 7897806775

State Name : Uttar Pradesh, Code : 09

Buyer (Bill to)

DCDC Health Services Private Limited

C-185, Mayapuri Industrial Area

Phase-II

Mayapuri

New Delhi-110064

State Name : Delhi, Code : 07

Invoice No	e-Way Bill No	Dated
OST2324/1348	721406317197	19-Feb-24
Delivery Note	Reference No	Date
Buyer's Order No	Dated	
104-022024-25099	6-Feb-24	
Dispatch Doc No.	Delivery Note Date	
Dispatched through	Destination	
Terms of Delivery		

Sl No	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	Set for Haemodialysis Curum (Post Pump) Batch : 24010708 Expiry : 31-Jan-28	90189099	300 pcs 300 pcs	100.00	pcs	30,000.00
2	AVF2516LF01E Vital 16G Batch : 2302150312 Expiry : 5-Nov-26	90183990	1,000 pcs 1,000 pcs	11.50	pcs	11,500.00
3	AVF2517LF01E Vital G17 Batch : 2302150263 Expiry : 12-Mar-26	90183990	500 pcs 500 pcs	11.50	pcs	5,750.00
4	Hollow Fibre Dialyser B1.4P Batch : 2303103422 Expiry : 25-Dec-26	90189031	240 pcs 240 pcs	307.00	pcs	73,680.00
						1,20,930.00
						CGST
						4,677.00
						SGST
						4,677.00
Total						2,040 pcs
						1,30,284.00 ₹

Stock/No. of Boxes Received 24
Subject to Physical Check OK
Name/Employee Code Phaminda K
Centre Name Phaminda K
Date/Time 23/01/24
Signature Phaminda K M. No. 8083293190

Amount Chargeable (in words) **One Lakh Thirty Thousand Two Hundred Eighty Four INR Only** E. & O E

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90189099	30,000.00	6%	1,800.00	6%	1,800.00	3,600.00
90183990	17,250.00	6%	1,035.00	6%	1,035.00	2,070.00
90189031	73,680.00	2.50%	1,842.00	2.50%	1,842.00	3,684.00
Total			4,677.00		4,677.00	9,354.00

Tax Amount (in words) : **Nine Thousand Three Hundred Fifty Four INR Only**

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 & UTIB0000738**
for **Gautam Healthcare Private Limited**

Company's PAN : **AAECG9710C**

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

Authorized Signatory