

Tax Invoice

ALLEN TON INC
 PLOT NO 26-B, UDYOG VIHAR PHASE 5
 SURUGRAM, HARYANA, 122001
 HR-66-1394-OW/H HR-66-1394-W/H
 GSTIN/UIN: 06CWIPK6698E1Z2
 State Name : Haryana, Code : 06
 E-Mail : allentoninc@gmail.com

Consignee (Ship to)
MAHARAJA AGRASEN MEDICAL COLLEGE
 AGROHA HISSAR HARYANA 125047
 CONTACT 7988339696
 State Name : Haryana, Code : 06

Buyer (Bill to)
DCDC Health Services Pvt Ltd.
 C- 185, Mayapuri Industrial Area Phase - 2,
 Mayapuri, New Delhi - 110064
 State Name : Delhi, Code : 07

Invoice No. AL/2022-23/HR414	Dated 25-Jan-23
Delivery Note	Mode/Terms of Payment
Reference No. & Date	Other References
Buyer's Order No. 36-012023-21474-6	Dated 18-Jan-23
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Terms of Delivery	

Sl No	Description of Goods	HSN/SAC	MRP/Marginal	Quantity	Rate	per	Disc. %	Amount
1	SINGLE LUMEN FEMORAL CATHETER (AVRO) Batch : 23010015C Expiry : 31-Dec-25	90183930		10 PCS 10 PCS	100.00	PCS		1,000.00
2	GUIDE WIRE S.S 35*70cm (J) Batch : SS22-03 Expiry : 31-Jul-26	9018		10 PCS 10 PCS	80.00	PCS		800.00
3	Introducer Needle 18 Gauge Batch : AIN2022-01 Expiry : 31-May-26	90183930		10 PCS 10 PCS	25.00	PCS		250.00
								2,050.00
IGST								246.00
Total				30 PCS				₹ 2,296.00

Amount Chargeable (in words) **INR Two Thousand Two Hundred Ninety Six Only** E & O.E

HSN/SAC	Taxable Value		Integrated Tax		Total Tax Amount
	Value	Rate	Amount	Rate	
90183930	1,250.00	12%	150.00		150.00
9018	800.00	12%	96.00		96.00
Total		2,050.00		246.00	246.00

Tax Amount (in words) **INR Two Hundred Forty Six Only**

Company's Bank Details
 Bank Name : **ICICI BANK**
 A/c No. : **182105001757 ALLENTON INC**
 Branch & IFS Code : **DWARKA & ICIC0000250**

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

for ALLENTON INC
 Authorised Signatory