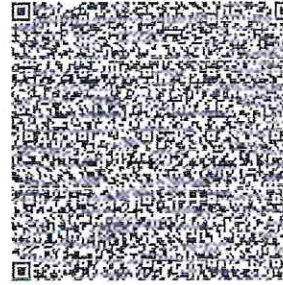


Tax Invoice

(ORIGINAL FOR RECIPIENT)

e-Invoice

IRN : 1a634ec1a77bf996b79d6021ea092e6c8830826837d33-a8367d99a4f90d701de
 Ack No. : 172313859801745
 Ack Date : 17-Nov-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

Invoice No. **AF/586/23-24**
 Dated **17-Nov-23**
 Delivery Note
 Mode/Terms of Payment

Reference No. & Date.
 Buyer's Order No. **154-112023-24040-6**
 Dispatch Doc No.
 Dated **8-Nov-23**
 Delivery Note Date

Consignee (Ship to)
DCDC Health Services Pvt Ltd.
 DHARAMSHEELA DEVI HOSPITAL, KENDUA
 GOWANA BIHAR
 Bihar - 805110, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Bihar, Code : 10

Dispatched through
 Destination **Gonawa Bihar**
 Bill of Lading/LR-RR No.
 Motor Vehicle No. **DL03CCH0214**

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

Terms of Delivery

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	SKY BLUE SCRUB SUIT SMALL BLUE UNIFORM SMALL	620429	2 Set	400.00	Set	800.0
2	SKY BLUE SCRUB SUIT MEDIUM BLUE UNIFORM MEDIUM	620429	2 Set	400.00	Set	800.0
3	SKY BLUE SCRUB SUIT LARGE BLUE UNIFORM LARGE	620429	2 Set	400.00	Set	800.0
						2,400.0
						60.0
						60.0
Total:						₹ 2,520.00

Stock/No. of boxes received **6 Pieces**
 Subject to Physical Check
 Name/Employee Code **Dr. Niranjan Anwar**
 Centre Name **Head of office**
 Date/Time **19.12.23 4:40 P.M**
 Signature **[Signature]** M. No. **9050092608**

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

	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
	2,400.00	2.50%	60.00	2.50%	60.00	120.0
Total:	2,400.00		60.00		60.00	120.0

Tax Amount (in words) : **INR One Hundred Twenty Only**

Remarks:
 BILL NO 586
 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 ANANDMAYI MARG OKHALA INDL PH-2 & HDFC0000033**

Customer's Seal and Signature for ANCHOR FAB

Prepared by _____ Verified by _____
 Authorised Signator

This is a Computer Generated Invoice

