

Tax Invoice

(DUPLICATE FOR TRANSPORTER)

ANCHOR FAB (2022-23)
 B - 4/2, Okhla Industrial Area, Phase-II, New Delhi-11
 GST NO. 07ABAPS2131D1Z7
 Delhi - 110020, India
 GSTIN/UIN: 07ABAPS2131D1Z7
 State Name : Delhi, Code : 07
 E-Mail : pulkit77@hotmail.com
 Consignee (Ship to)

DCDC Health Services Pvt Ltd.
 DISTRICT HOSPITAL MAINPURI
 MAINPURI UTTARPARDESH
 110064, India

GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 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

Invoice No. 760	Dated 10-Mar-23
Delivery Note	Mode/Terms of Payment
Reference No. & Date.	Other References
Buyer's Order No. 102-012023-21537-4	Dated 11-Jan-23
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination MAYAPURI

Terms of Delivery

SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	SKY BLUE SCRUB SUIT MEDIUM BLUE UNIFORM MEDIUM	6302	5%	6 Set	400.00	Set		2,400.00
								60.00
								60.00

DCDCHSPL CENTRE-DIST. HOSPITAL MAINPURI
MATERIAL RECEIVED
 DATE 24/3/2023
 TIME 9:40 AM RECEIVED BY [Signature]

Total **6 Set** ₹ **2,520.00**
 E & O.E

Amount Chargeable (in words)
INR Two Thousand Five Hundred Twenty Only

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
6302	2,400.00	2.50%	60.00	2.50%	60.00	120.00
Total	2,400.00		60.00		60.00	120.00

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

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 & HBFC0000337**
 for **ANCHOR FAB (2022-23)**

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

Authorized Signatory
 [Signature]