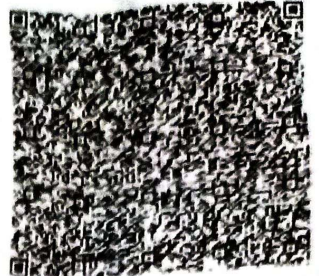


Tax Invoice

(DUPLICATE FOR TRANSPORTER)

e-Invoice



IN : ef25b04cbef0ec4d7ba1d21b27b97924dc3a9b777daa2.
 bea513c77bb8af75878
 Ack No. : 172313960866956
 Ack Date : 4-Dec-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
 Consignee (Ship to)

DCDC Health Services Pvt Ltd.
 REGIONAL MEDICAL COLLEGE, NAHAN HP.
 Himachal Pradesh - 173001, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Himachal Pradesh, Code : 02
 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.
AF/632/23-24
 Delivery Note

Reference No. & Date.

Buyer's Order No.
66-112023-24234
 Dispatch Doc No.

Dispatched through

Bill of Lading/LR-RR No.

Terms of Delivery

Dated
4-Dec-23
 Mode/Terms of Payment

Other References

Dated
6-Nov-23
 Delivery Note Date

Destination
NAHAN
 Motor Vehicle No.
DL03CCH0214

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	UNIFORM PANT SHIRT SET SHIRT & TROUSER MALE MEDIUM	620429	2 Set	850.00	Set	1,700.00
						42.50
						42.50
						SGST 2.5%
						CGST 2.5%
						Total
			2 Set			₹ 1,785.00

Stock/No. of Boxes Received **02 Box**
 Subject to Physical Check
 Name/Employee Code **Jagdish/DCDC0555**
 Centre Name **NAHAN**
 Date/Time **8/12/2023**
 Signature **[Signature]** M. No. **9418159046**

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

Taxable Value	Central Tax		State Tax		Total Tax Amount
	Rate	Amount	Rate	Amount	
1,700.00	2.50%	42.50	2.50%	42.50	85.00
Total:		1,700.00		42.50	85.00

Tax Amount (in words) : **INR Eighty Five Only**

Remarks: **BILL NO 632**

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

Customer's Seal and Signature

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 & HDFC0000337**
for ANCHOR FAB

Prepared by _____
 This is a Computer Generated Invoice
 Verified by _____

