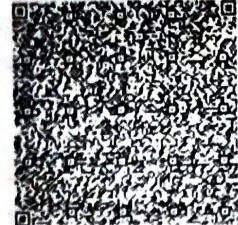


Tax Invoice Cum Delivery Challan

e-Invoice



IRN : f472bcd427172fc528709af928538571e4deb28-240142b52f1298e69edfe2108  
 Ack No. : 182415244166615  
 Ack Date : 9-Jan-24

**ARIVATION HEALTHCARE PRIVATE LIMITED**  
 Site Office: 16/24 Dr. Suresh Chandra Banerjee Road  
 KOLKATA Kolkata WB  
 KOLKATA-700010  
 GSTIN/UIN: 19AASCA6131H1ZF  
 State Name : West Bengal, Code : 19  
 Contact : 6289556902, 9836667979  
 E-Mail : arivationhealthcare@gmail.com  
 www.arivation.com

Consignee (Ship to)  
**DCDC Health Service Pvt. Ltd.**  
 Regional Medical College Nahani; Sundar  
 Bagh Colony, Nahani; Himachal Pradesh  
 -173001, Contact No : 9418159046  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Himachal Pradesh, Code : 02

Buyer (Bill to)  
**DCDC Health Service Pvt. Ltd.**  
 C-185, Mayapuri Industrial Area phase- 2,  
 Mayapuri, New Delhi-110064  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Delhi, Code : 07  
 Place of Supply : Delhi

Invoice No. <b>AHPL/2324/411</b>	Dated <b>9-Jan-24</b>
Delivery Note	Mode/Terms of Payment <b>30 DAYS</b>
Reference No. & Date	Other References
Buyer's Order No. <b>56-012024-24719</b>	Dated <b>5-Jan-24</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through <b>SAFEXPRESS</b>	Destination <b>NAHAN</b>
Terms of Delivery	

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	<b>DRY CITRATE 10 LTR WITH DEXTROSE(PARTA+PARTB-1:2)</b> Batch : DC2324374 Expiry: 31-Dec-25	30049032	50 Pcs 50 Pcs	169.00	Pcs		8,450.00
	<b>Igst Output</b>						1,014.00
	<b>Total</b>		<b>50 Pcs</b>				<b>9,464.00</b>

Stock/No. of Boxes Received ..... 10 Box  
 Subject to Physical Check  
 Name/Employee Code ..... Jagdish Doss S  
 Centre Name ..... R. H. Aguan  
 Date/Time ..... 19/1/24 ..... 2:40 Pm  
 Signature ..... [Signature] M. No. 9418159046

Amount Chargeable (in words) **Indian Rupees Nine Thousand Four Hundred Sixty Four Only** E & O E

Taxable Value	IGST		Total Tax Amount
	Rate	Amount	
8,450.00	12%	1,014.00	1,014.00
<b>Total: 8,450.00</b>		<b>1,014.00</b>	<b>1,014.00</b>

Tax Amount (in words) : **Indian Rupees One Thousand Fourteen Only**

Declaration  
 DL No: WB/KOL/NBO/W/320645 & WB/KOL/BO/W/320645  
 MSME UAM No. WB10D0023343  
 Interest @24% PA will be charged after credit period  
 Goods once sold will not be taken back or exchanged

Company's Bank Details  
 A/c Holder's Name : **ARIVATION HEALTHCARE PRIVATE LIMITED**  
 Bank Name : **Union Bank of India**  
 A/c No. : **015225010000001**  
 Branch & IFS Code : **Dharmatolla Branch & UBIN0901521**  
 SWIFT Code : **UBININBOCL**

Customer's Seal and Signature

for ARIVATION HEALTHCARE PRIVATE LIMITED  
 [Signature]  
 Authorised Signatory

