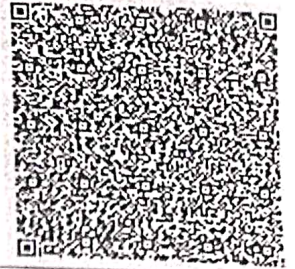



IRN : 761f1a3d115209daba60edfd3d08184b8a75201f76d2aa2-5858ef37c82c075eb
 Ack No. : 182415792969902
 Ack Date : 21-Mar-24



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	Invoice No.	Dated
	AHPL/2324/602	21-Mar-24
DCDC Health Service Pvt. Ltd. Civil Hospital Bhiwani, 1st Floor, Near PMO Office, Ch. Bansilal Civil Hospital, Bhiwani, Ghanta Ghar Chowk, 127021, Contact No : 9813981347 GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Haryana, Code : 06	Delivery Note	Mode/Terms of Payment
		30 DAYS
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	Reference No. & Date.	Other References
Buyer (Ship to)	Buyer's Order No.	Dated
	49-032024-25386	20-Mar-24
DCDC Health Service Pvt. Ltd. Civil Hospital Bhiwani, 1st Floor, Near PMO Office, Ch. Bansilal Civil Hospital, Bhiwani, Ghanta Ghar Chowk, 127021, Contact No : 9813981347 GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Haryana, Code : 06	Dispatch Doc No.	Delivery Note Date
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	Dispatched through	Destination
	SAFEXPRESS	BHIWANI
Buyer (Bill to)	Vessel/Flight No.	Place of receipt by shipper.
	City/Port of Loading	City/Port of Discharge
Terms of Delivery		

SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	Dry Dialysate 36.83x – 50 Lit.MIX (With Part B) Batch : DC2324426 Expiry : 31-Mar-26	30049032	12 %	50 Pcs 50 Pcs	825.00	Pcs		41,250.00
	Igst Output							4,950.00
	Total			50 Pcs				₹ 46,200.00

Stock/No. of Boxes Received 49
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time 21-03-24 12:00 PM
 Signature
 Stamp: Bhiwani, 506-0076

Amount Chargeable (in words) Indian Rupees Forty Six Thousand Two Hundred Only	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 & UBIN0530131 SWIFT Code : UBININBBOCL
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	for ARIVATION HEALTHCARE PRIVATE LIMITED  Authorised Signatory

SUBJECT TO KOLKATA JURISDICTION

This is a Computer Generated Invoice