



IRN : 5917a102c830f9a0c378da8ce4d59b79288aa274f37c64b-05fdcb939960dc5a5
 Ack No. : 182415715278526
 Ack Date : 11-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

Consignee (Ship to)
DCDC Health Service Pvt. Ltd.
 Sadar Hospital Simdega, NH 23, THANA TOLLI,
 SALDEGA, SIMDEGA, JHARKHAND-835223,
 Contact, No : 8506000395
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Jharkhand, Code : 20

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. | Dated |
| AHPL/2324/541 | 11-Mar-24 |
| Delivery Note | Mode/Terms of Payment |
| | 30 DAYS |
| Reference No. & Date. | Other References |
| Buyer's Order No. | Dated |
| Dispatch Doc No. | Delivery Note Date |
| Dispatched through | Destination |
| DELHIVERY | SIMDEGA |
| 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 | Quantity | Rate | per | Disc. % | Amount |
|--------|--|----------|--------------------|--------|-----|---------|-------------|
| 1 | DIALYZER 1.6 OCI HD16L Batch : 230508 Expiry : 4-May-26 | 90189031 | 120 Pcs 120 Pcs | 290.00 | Pcs | | 34,800.00 |
| | <i>lgst Output</i> | | | | | | 1,740.00 |
| | Total | | 120 Pcs | | | | ₹ 36,540.00 |

Stock/No. of Boxes Received *05 Box*
 Subject to Physical Check
 Name/Employee Code *Chandni Ver. / DC01373*
 Centre Name *DH - SIMDEGA*
 Date/Time *14/3/2024 11:30am*
 Signature *Chandni* M. No. *9852392824*

Amount Chargeable (in words) **Indian Rupees Thirty Six Thousand Five Hundred Forty Only** E. & O.E

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 & UBIN0530131
 SWIFT Code : UBININBBOCL

for ARIVATION HEALTHCARE PRIVATE LIMITED


SUBJECT TO KOLKATA JURISDICTION
 This is a Computer Generated Invoice