

Tax Invoice Cum Delivery Challan

e-Invoice



IRN : 29a927d7f33ff454cfd075abc3920d478a15fd3343cb0f73-a708716590e11680
 Ack No. : 182415767200199
 Ack Date : 18-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. District Hospital, Pilibhit, Dialysis Unit, District Hospital, Pilibhit Near Kendriya, Vidyalaya, Tanakpur road, Ekta nagar, Pilibhit, Uttar Pradesh, 262001, Contact No : 9045801912 GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Uttar Pradesh, Code : 09 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/2324/586	18-Mar-24
	Delivery Note	Mode/Terms of Payment
		30 DAYS
	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	89-032024-25682	16-Mar-23
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
	DELHIVERY	PILIBHIT
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 : 230936 Expiry : 15-Sep-26	90189031	8 Pcs 8 Pcs	290.00	Pcs		2,320.00
	Igst Output						116.00
Total			8 Pcs				₹ 2,436.00

Stock/No. of Boxes Received 6 Pcs
 Subject to Physical Check
 Name/Employee Code D. G. 1973 / Mohd Raza
 Centre Name Pilibhit
 Date/Time 18/3/24 / 11:50 AM
 Signature M. Raza M. No. 9045801912

Amount Chargeable (in words)
Indian Rupees Two Thousand Four Hundred Thirty Six 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