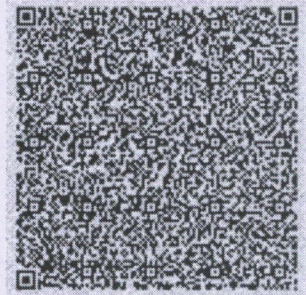


Tax Invoice Cum Delivery Challan

e-Invoice



IRN : 52eef0954dcbc20ee39bcc4f6ec65c78ba09ec300c649c-7b633e0cee07ec806
 Ack No. : 182415518271715
 Ack Date : 15-Feb-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/2324/468	15-Feb-24
Consignee (Ship to) DCDC Health Service Pvt. Ltd. SADAR HOSPITAL-Bokaro,CAMP NO -2 NEAR DC OFFICE, BOKARO,JHARKHAND-827001, Contact No : 8506000228 GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Jharkhand, Code : 20	Delivery Note	Mode/Terms of Payment
		30 DAYS
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	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	31-022024-25066	7-Feb-24
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
	SAFEXPRESS	JHARKHAND
	Vessel/Flight No.	Place of receipt by shipper:
	City/Port of Loading	City/Port of Discharge
	Terms of Delivery	

Sl 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 : DC2324419 Expiry : 28-Feb-26 Rate of Duty: 12%	30049032	12 %	50 Pcs 50 Pcs	825.00	Pcs		41,250.00
	Igst Output							4,950.00
Total				50 Pcs				₹ 46,200.00

Amount Chargeable (in words)

Indian Rupees Forty Six Thousand Two Hundred Only

E. & O.E

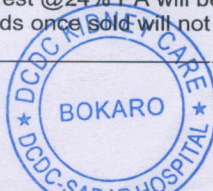
Declaration

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 : UBININBOCL

for ARIVATION HEALTHCARE PRIVATE LIMITED



Signature
 Authorised Signatory

SUBJECT TO KOLKATA JURISDICTION
 Stock/No. of Boxes Received
 This is a Computer Generated Invoice
 Subject to Physical Check
 Name/Employee Code
 Centre Name BOKARO