


Tax Invoice Cum Delivery Challan

 <p>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</p>	Invoice No. AHPL/2324/156	Dated 19-Jul-23
	Delivery Note	Mode/Terms of Payment 30 DAYS
Reference No. & Date.	Other References	
Buyer's Order No. 31-072023-23120	Dated 5-Jul-23	
Dispatch Doc No.	Delivery Note Date	
Dispatched through SAFEXPRESS	Destination BOKARO	
Bill of Lading/LR-RR No. dt. 19-Jul-23	Motor Vehicle No.	
Terms of Delivery		

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount	
1	DRY CITRATE 10 LTR WITH DEXTROSE(PARTA+PARTB-1:2) Batch : DC2324173 Expiry : 31-Jul-25	30049032	200 Pcs 200 Pcs	169.00	Pcs		33,800.00	
	Igst Output						4,056.00	
Total							200 Pcs	₹ 37,856.00



Stock/No. of Boxes Received 40
 Subject to Physical Check
 Name/Employee Code DC 00144
 Centre Name BOKARO
 Date/Time 17/7/23 9AM
 Signature [Signature] M. No. 8506000228

Amount Chargeable (in words) E. & O.E
Indian Rupees Thirty Seven Thousand Eight Hundred Fifty Six Only

Taxable Value	IGST		Total Tax Amount
	Rate	Amount	
33,800.00	12%	4,056.00	4,056.00
Total: 33,800.00		4,056.00	4,056.00

Tax Amount (in words) : **Indian Rupees Four Thousand Fifty Six 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
 Bank Name : **Union Bank of India**
 A/c No. : **015225010000001**
 Branch & IFS Code : **Dharmatolla Branch & UBIN0901521**

Customer's Seal and Signature for ARIVATION HEALTHCARE PRIVATE LIMITED