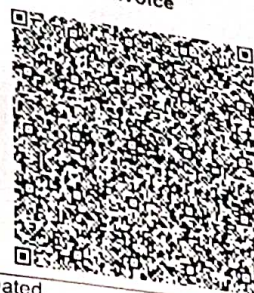


IRN : af86621b7051bcc2aa35710d3ec544080dc0224d334f4a9-
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 Ack No. : 182415726355539
 Ack Date : 12-Mar-24



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, Lakhimpur Khiri, Near T.B ward
 Hospital, road, Dist, Police line, Lakhimpur, Uttar
 pradesh 262701, Contact No : 6393323652
 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.	AHPL/2324/575	Dated	12-Mar-24
Delivery Note		Mode/Terms of Payment	30 DAYS
Reference No. & Date.		Other References	
Buyer's Order No.	87-032024-25636	Dated	11-Mar-24
Dispatch Doc No.		Delivery Note Date	
Dispatched through	DELHIVERY	Destination	Lakhimpur Khiri
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	144 Pcs 144 Pcs	290.00	Pcs		41,760.00
	Igst Output						2,088.00
Amount Chargeable (in words)		Total	144 Pcs				₹ 43,848.00

Stock/No. of Boxes Received **06**
 Subject to Physical Check
 Name/Employee Code **Shubham/DC02360**
 Name **Lakhimpur**
 Date/Time **14/3/24 / 02:50 PM**
 Signature **[Signature]** M. No. **0318342410**

Indian Rupees Forty Three Thousand Eight Hundred Forty Eight 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
 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



[Signature]
 Authorised Signatory