Tax Invoice

R	M	Mad	ical	SVE	tems	Inc
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10-2-360,361, Road No.9, West Marredpally,

Secunderabad, Hyderabad, Telangana GSTIN/UIN: 36AICPD5956C1ZJ

State Name: Telangana, Code: 36 Contact: 040-4602 4400,09248090660 E-Mail: sales@bnmedicalsystems.com

Consignee

DCDC Health Service Pvt. Ltd.

Area Hospital Vemulawada

Rajanna Sircilla Dist - 505302

Contact: 9876237955

GSTIN/UIN

State Name

: Telangana, Code: 36

Buyer (if other than consignee)

DCDC Health Service Pvt. Ltd.

C-185, Mayapuri Industrial Area Phase-II

New Delhi-110064 DL No:2014PTC265804

GSTIN/UIN

: 07AAFCD0204K1Z1

State Name

: Delhi, Code: 07

Invoice No.	Dated
173	18-Oct-2023
Delivery Note	Mode/Terms of Payment
206	60 Days
Supplier's Ref.	Other Reference(s)
173	Vemulawada
Buyer's Order No.	Dated
127-102023-23893	11-Oct-2023
Despatch Document No.	Delivery Note Date
206	18-Oct-2023
Despatched through	Destination
Transport	Vemulawada

Terms of Delivery

Immd

SI No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1 2	Sodium Hypo 10% (5Ltr) Freight Charges		18 % 0 %	6 Nos	320.00	Nos		1,920.00 1,500.00
	IGST		13/	ULAWADA *	2/10/	202	3	3,420.00 345.60
			PCOC.A	REAMO	DC027	4		
	Total	I		6 Nos				₹ 3,765.60
Λm	ount Chargeable (in words)							F&OF

Amount Chargeable (in words)

E. & O.E

INR Three Thousand Seven Hundred Sixty Five and Sixty paise Only

HSN/SAC	Taxable Value	Integrated Tax		Total
		Rate	Amount	Tax Amount
	1,920.00	18%	345.60	345.60
Total	1,920.00	36	345.60	345.60

Tax Amount (in words): INR Three Hundred Forty Five and Sixty paise Only

Company's Bank Details

Bank Name

: Standard Chartered Bank

A/c No.

: 44505090492

Branch & IFS Code: SP Road Secunderabad & SCBL 0036081

for B N Medical Systems Inc

Authorised Signatory

Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.