

Tax Invoice

(ORIGINAL FOR RECIPIENT)

e-Invoice

*Spoke as on 02/06/22*  
*ES 160*



IRN : b3e372852866916d3fee19aa952bb9fc926fc-b9d99e72cad93f52efd8e9384d9  
Ack No. : 132212671463044  
Ack Date : 28-Jun-22

medikabazaar Boston Ivy Healthcare Solutions Pvt Ltd Plot No. 497, Udyog Vihar, Phase-3 Gurgaon, Haryana - 122022 DL NO. HR-66-1447-W/H (21B) DL No. HR-66-1447-OW/H (20B) Haryana - 122022, India GSTIN/UIN: 06AAFCB5524J1ZQ State Name : Haryana, Code : 06 E-Mail : accounts@medikabazaar.com	Invoice No. <b>HR/22-23/01762</b>	Dated <b>28-Jun-22</b>
	Delivery Note	Mode/Terms of Payment <b>45 Days</b>
Consignee (Ship to) <b>DCDC Health Services Private Limited</b> Civil Hospital Fatehabad, Dialysis Unit, Ground Floor, Near Bus Stand, Model Town Fatehabad, Haryana, 125050, MOB. 9610065777 Haryana - 125050, India PAN/IT No : AAECD2052Q State Name : Haryana, Code : 06 Contact : 8506004550	Reference No. & Date. <b>HR/22-23/01762 dt 28-Jun-22</b>	Other References <b>OM1047489917</b>
	Buyer's Order No. <b>71-062022-17586-1</b>	Dated <b>12-Jun-22</b>
Buyer (Bill to) <b>DCDC Health Services Private Limited</b> C-185, First Floor, Mayapuri Industrial Area Phase-II, Mayapuri, New Delhi, Delhi, 110064, MOB. 8506004550 Delhi - 110064, India GSTIN/UIN : 07AAECD2052Q1ZQ PAN/IT No : AAECD2052Q State Name : Delhi, Code : 07 Place of Supply : Delhi Contact : 8506004550	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination <b>FATEHABAD</b>
	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	MRP/Marginal	Quantity		Rate	per	Disc. %	Amount
					Shipped	Billed				
1	NS 0.9% 100ml (Amanta) Injection (MBPHM20AINJAMAN000015) Batch: 50610447 Expiry: 31-Oct-24  Output IGST	30045020	12 %	37.92/Nos	100 Nos	100 Nos	9.50	Nos		950.00
					100 Nos	100 Nos				114.00
Total					100 Nos	100 Nos				Rs. 1,064.00

*Voucher closed*

Amount Chargeable (in words) **INR One Thousand Sixty Four Only** E. & O.E

HSN/SAC	Taxable Value	Integrated Tax Rate	Integrated Tax Amount	Total Tax Amount
30045020	950.00	12%	114.00	114.00
<b>Total</b>	<b>950.00</b>		<b>114.00</b>	<b>114.00</b>

Tax Amount (in words) : **INR One Hundred Fourteen Only**  
Company's PAN : **AAFCB5524J**

Declaration  
 "We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.  
 Terms & Conditions :  
 1) We are a MSME Regd. Co. with Reg. No. MH18D0004716  
 2) Goods once sold will not be taken back  
 3) If due amount is not paid as per agreed payment terms interest will be charged at 18% p.a for delayed payment.  
 4) Parties agreed post warranty, service of medical equipment or machinery traded under this invoice shall be at the sole discretion of Company or its affiliates only. 5) The product are sold AS IS by Company, the original Manufacturer / Supplier shall be responsible for any warranty or liabilities."

Company's Bank Details  
 A/c Holder's Name: **Boston Ivy Healthcare Solutions Pvt Ltd**  
 Bank Name : **ICICI BANK MUMBAI**  
 A/c No. : **001105031488**  
 Branch & IFS Code : **WATERFIELD ROAD, W, MUMBAI & ICIC0000038**  
 SWIFT Code :

for Boston Ivy Healthcare Solutions Pvt Ltd  
 Prepared by \_\_\_\_\_ Verified by \_\_\_\_\_ Authorised Signatory \_\_\_\_\_

*Pool*