

Tax Invoice Cum Delivery Challan

e-Invoice



IRN : 19a0072ae74060ce1d395e1e3f348b7c1e496a-d4d4cee8fde7fd9eef68e71379  
 Ack No. : 182314509984013  
 Ack Date : 29-Sep-23

	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	Invoice No. <b>AHPL/2324/274</b>	Dated <b>29-Sep-23</b>
	Consignee (Ship to) <b>DCDC Health Service Pvt. Ltd.</b> Civil Hospital Bahadurgarh; DCDC KIDNEY CARE, MADHYA MARG, OLD INDUSTRIAL AREA; BAHADURGARH, HARYANA -124507; Contact No : 8506006622 GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Haryana, Code : 06	Delivery Note Reference No. & Date.	Mode/Terms of Payment <b>30 DAYS</b>
Buyer (Bill to) <b>DCDC Health Service Pvt. Ltd.</b> C-185, Mayapuri Industrial Area phase- 2, Mayapuri, New Delhi-110064 GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Delhi, Code : 07 Place of Supply : Haryana	Dispatched through <b>DELHIVERY</b>	Buyer's Order No. <b>46-092023-23640</b>	Dated <b>6-Sep-23</b>
	Bill of Lading/LR-RR No. <b>dt. 29-Sep-23</b>	Dispatch Doc No.	Delivery Note Date
	Destination <b>BAHADURGARH</b>	Terms of Delivery	Motor Vehicle No. <b>WB23F2662</b>

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount	
1	Cartridge Filter 20" Jumbo Wound	84219900	24 Pcs	300.00	Pcs		7,200.00	
	igst Output						1,296.00	
Stock/No. of Boxes Received ..... 2 Box.. Subject to Physical Check Name/Employee Code ..... DC00504 Centre Name ..... C.H. Bahadurgarh Date/Time ..... 4/10/23 Signature ..... Medhy ..... M. No. .... 85060022								
Signature ..... Date/Time ..... Centre Name ..... Name/Employee Code ..... Subject to Physical Check Stock/No. of Boxes Received .....								
<b>Total</b>							<b>24 Pcs</b>	<b>8,496.00</b>

Amount Chargeable (in words) **Indian Rupees Eight Thousand Four Hundred Ninety Six Only** E. & O.E

Taxable Value	IGST Rate	IGST Amount	Total Tax Amount
7,200.00	18%	1,296.00	1,296.00
<b>Total:</b>		<b>1,296.00</b>	<b>1,296.00</b>

Tax Amount (in words) : **Indian Rupees One Thousand Two Hundred Ninety 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  
 A/c Holder's Name: **ARIVATION HEALTHCARE PRIVATE LIMITED**  
 Bank Name : **Union Bank of India**  
 A/c No. : **015225010000001**  
 Branch & IFS Code: **Dharmatolla Branch & UBIN0901521**  
 SWIFT Code : **UBININBB0CL**

Customer's Seal and Signature \_\_\_\_\_ for ARIVATION HEALTHCARE PRIVATE LIMITED