

**Tax Invoice**

(DUPLICATE FOR TRANSPORTER)

e-Invoice



IRN : 1a30c2119c19ae7538f7ce6f43327d6b7cf1465868bd6f8-fad0dd92e8b2fdac2  
 Ack No. : 172415397852239  
 Ack Date : 15-Jul-24

<b>ANCHOR FAB</b> B - 4/2, Okhla Industrial Area, Phase-II, New Delhi-11 GST NO. 07ABAPS2131D1Z7 ISO 9001:2015 Delhi - 110020, India GSTIN/UIN: 07ABAPS2131D1Z7 State Name : Delhi, Code : 07 E-Mail : pulkit77@hotmail.com Consignee (Ship to) <b>DCDC Health Services Pvt Ltd.</b> DIST. HOSPITAL SANT KABIR NAGER, MEHDawal ROAD KALILABAD Uttar Pradesh - 272175, India GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Uttar Pradesh, Code : 09 Buyer (Bill to) <b>DCDC Health Services Pvt Ltd.</b> C-185, 1st Floor, Mayapuri Industrial, Area, Phase -2, New Delhi. Delhi - 110064, India GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Delhi, Code : 07 Place of Supply : Delhi	Invoice No.	Dated
	AF/305/24-25	15-Jul-24
	Delivery Note	Mode/Terms of Payment
	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	90-072024-26678	4-Jul-24
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
		KHALILABAD
	Bill of Lading/LR-RR No.	Motor Vehicle No.
		DL03CCH0214
	Terms of Delivery	

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount	
1	SKY BLUE SCRUB SUIT MEDIUM BLUE UNIFORM MEDIUM	620429	2 Set	400.00	Set	800.00	
2	SKY BLUE SCRUB SUIT LARGE BLUE UNIFORM LARGE	620429	2 Set	400.00	Set	800.00	
3	UNIFORM PANT SHIRT SET SHIRT & TROUSER MALE XXL	620429	1 Set	850.00	Set	850.00	
						2,450.00	
Stock/No. of Boxes Received ..... 01 ..... Subject to Physical Check Name/Employee Code ..... M. C. N. KHARAJ DC02463 Centre Name ..... DMSK N Date/Time ..... 20/07/24 - 4:00pm Signature ..... M. No. 9310146075						SGST 2.5% CGST 2.5% 61.25 61.25	
Total						5 Set	₹ 2,572.50

Amount Chargeable (in words) E. & O.E

**INR Two Thousand Five Hundred Seventy Two and Fifty paise Only**

Taxable Value	Central Tax		State Tax		Total Tax Amount
	Rate	Amount	Rate	Amount	
2,450.00	2.50%	61.25	2.50%	61.25	122.50
<b>Total:</b>		<b>2,450.00</b>		<b>61.25</b>	<b>61.25</b>

Tax Amount (in words) : **INR One Hundred Twenty Two and Fifty paise Only**

Remarks:  
BILL NO 305

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

Company's Bank Details  
 A/c Holder's Name : **ANCHOR FAB**  
 Bank Name : **HDFC BANK LTD**  
 A/c No. : **03372020000609**  
 Branch & IFS Code : **MAA ANANDMAYI MARG OKHALA INDL PH-2 & HDFC0000337**

Customer's Seal and Signature

Prepared by \_\_\_\_\_ Verified by \_\_\_\_\_

