Gautam Healthcare Private Limited 248, First Floor, Cycle Mkt, Jhanda walan Extension, New Jelhi-110 055 981/116228 ARECG9710C DL Number-DL-MTM-145471 DT 22.06.2021 GSTIN/UIN: 07AAECG9710C1ZV State Name: Delhi, Code: 07 CIN: U85100DL2011PTC227049		Reference No. & Date.		6-Api	Dated 6-Apr-24 Mode/Terms of Payment 30 Days Other References Dated 5-Apr-24		
				Other			
E-	E-Mail : vivek@gautamhealthcare.com Consignee (Ship to) DCDC Health Services Private Limited District Hospital Mainpuri Dialysis Center, maharaja tej pratap singh district hospital mainpuri Uttar Pradesh, 205001 Contact No : 7895170086 State Name : Uttar Pradesh, Code : 09 Buyer (Bill to)		102-042024-25764				
Di			Dispatch Doc No. Delivery			/ Note Date	
m			Dispatched through Destination				
St			Terms of Delivery				
C- Ph Ma	CDC Health Services Private Limited -185,Maypuri Industrial Area nase-II ayapuri ew Delhi-110064						
	ate Name : Delhi, Code : 07						
SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount	
1	Hollow Fibre Dialyser B1.4P	90189031	144 pcs	307.00	pcs	44,208.00	
	Batch : 2303103422 Expiry : 25-Dec-26 CGST SGST SGST Round Off		144 pcs			1,105.20 1,105.20 (-)0.40	
	Stock/No. of Boxes Received	Potab (SP) 1895170	0002210)				
	Total		144 pcs			46,418.00 ₹	
Am	nount Chargeable (in words)					E. & O.E	
	orty Six Thousand Four Hundred Eighteen INR Only			000==			

Taxable HSN/SAC SGST/UTGST Tax Amount 2,210.40 Rate Rate Value Amount Amount 1,105.20 2.50% 90189031 44,208.00 2.50% 1,105.20 Total 44,208.00 1,105.20 1,105.20 2,210.40

Tax Amount (in words): Two Thousand Two Hundred Ten INR and Forty Only

Company's Bank Details

A/c Holder's Name: Gautam Healthcare Private Limited

Axis Bank Limited Bank Name

A/c No. : 917020076226068

Branch & IFS Code: Jhandewalan Extension & UTIB0000738

for Gautam Healthcare Private Limited

Authorised Signatory

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

: AAECG9710C

Company's PAN