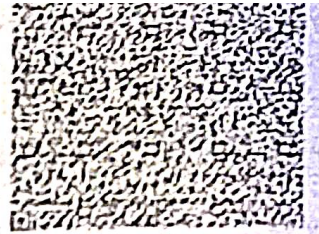


IRN : a120c81749e15d54b042e310b9500a7a0233ed99c51n20-4ff45b5074e3210b54
 Ack No. : 17241417700924D
 Ack Date : 8-Jan-24



ANCHOR FAB
 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)

DCDC Health Services Pvt Ltd.
 DISTRICT HOSPITAL PRAYAGRAJ, MOTI LAI
 NEHRU HOSPITAL (COLVIN HOSPITAL)
 Uttar Pradesh - 211003, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Uttar Pradesh, Code : 09
 Buyer (Ship to)

DCDC Health Services Pvt Ltd.
 C-185, 1st Floor, Mayapuri Industrial, Area, Phase
 -2, New Delhi.
 Delhi - 110054, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

Invoice No. **AF/733/23-24**
 Delivery Note
 Dated **8-Jan-24**
 Mode/Terms of Payment

Reference No. & Date. Other References

Buyer's Order No. **58-012024-24764**
 Dispatch Doc No.
 Dated **5-Jan-24**
 Delivery Note Date

Dispatched through Destination **PRAYAGRAJ**
 Bill of Lading/LR-RR No. Motor Vehicle No. **DL03CCH10214**

Terms of Delivery

Sl. No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	UNIFORM PANT SHIRT SET PANT SHIRT SET MALE XL SIZE	620429	1 Set	850.00	Set	850.00
						SGST 2.5% 21.25
						CGST 2.5% 21.25

Total 1 Set ₹ 892.50
 Amount Chargeable (in words) **INR Eight Hundred Ninety Two and Fifty paise Only**
 E & O.E

	Taxable Value		Central Tax		State Tax		Total Tax Amount
	Value	Rate	Amount	Rate	Amount		
Total:	850.00	2.50%	21.25	2.50%	21.25	42.50	

Tax Amount (in words) : **INR Forty Two and Fifty paise Only**

Remarks: **BILL NO 733**
 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 : **BLA ANANDWATI BRANCH DELHI**

Customer's Seal and Signature

Boxes Received 2
 Prepared by Verified by
 Physical Check This is a Computer Generated Invoice
 Employee Code **2412**
 Name **S.P. XPRIT**
 Date/Time
 Signature M. No. **750558**

