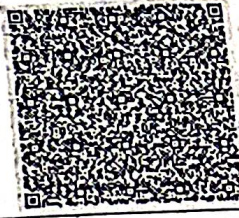


Tax Invoice Cum Delivery Challan

e-Invoice



IRN : fabdb60ae843fc47e4e4bde45015a78a1344f33-
cb5ea3d3c5fab8519a1d0e300
Ack No. : 182314163898358
Ack Date : 12-AUG-23

ARIVATION
DialysisGPS

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

Consignee (Ship to)
DCDC Health Service Pvt. Ltd.
District Hospital Prayagraj, Moti Lal Nehru
Hospital (Colvin Hospital) 14, Doctor KN,
Katju Road, Nakash Kohra, Mirabad,
Prayagraj, 211003, Contact No : 7505825717
GSTIN/UIN : 07AAFCD0204K1Z1
State Name : Other Territory, Code : 97

Buyer (Bill to)
DCDC Health Service Pvt. Ltd.
C-185, Mayapuri Industrial Area phase- 2,
Mayapuri, New Delhi-110064
GSTIN/UIN : 07AAFCD0204K1Z1
State Name : Other Territory, Code : 97
Place of Supply : Other Territory

Invoice No. **AHPL/2324/199**
Dated **12-Aug-23**

Delivery Note
Mode/Terms of Payment
30 DAYS

Reference No. & Date.
Other References

Buyer's Order No.
58-082023-23519-1
Dated **11-Aug-23**

Dispatch Doc No.
Delivery Note Date

Dispatched through
SAFEXPRESS
Destination
PRAYAGRAJ,UP

Bill of Lading/LR-RR No.
dt. 12-Aug-23
Motor Vehicle No.

Terms of Delivery

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	DRY CITRATE 10 LTR WITH DEXTROSE(PARTA+PARTB-1:2) Batch : DC2324222/1 Expiry: 31-Aug-25 <i>lgst Output</i>	30049032	200 Pcs 200 Pcs	169.00	Pcs		33,800.00
							4,056.00
Total			200 Pcs				₹ 37,856.00

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature

Amount Chargeable (in words)
Indian Rupees Thirty Seven Thousand Eight Hundred Fifty Six Only

Taxable Value	IGST		Total Tax Amount
	Rate	Amount	
33,800.00	12%	4,056.00	4,056.00
Total: 33,800.00		4,056.00	4,056.00

Tax Amount (in words) : **Indian Rupees Four Thousand Fifty Six Only**

Declaration
DL No: WB/KOL/NBOW/320645 & WB/KOL/BOW/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
Bank Name : **Union Bank of India**
A/c No. : **015225010000001**
Branch & IFS Code : **Dharmatolla Branch & UBIN0901521**

Customer's Seal and Signature

for ARIVATION HEALTHCARE PRIVATE LIMITED



Authorised Signatory