

**Tax Invoice**

(DUPLICATE)

**ANCHOR FAB (2022-23)**  
 B - 4/2, Okhla Industrial Area, Phase-II, New Delhi-11  
 GST NO. 07ABAPS2131D1Z7  
 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  
 UTTAR PRADESH - 211003  
 Uttar Pradesh - 110064, India  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Uttar Pradesh, Code : 09  
 Buyer (Bill to)

**DCDC Health Services Pvt Ltd.**  
 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. <b>791</b>	Dated <b>20-Mar-23</b>
Delivery Note	Mode/Terms of Payment
Reference No. & Date.	Other References
Buyer's Order No. <b>58-032023-22065-8</b>	Dated <b>6-Mar-23</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination <b>PRAYAGRAJ</b>
Bill of Lading/LR-RR No.	Motor Vehicle No. <b>DL03CCH0214</b>
Terms of Delivery	

SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	<b>SKY BLUE SCRUB SUIT XXL</b> BLUE UNIFORM XXL	6302	5 %	2 Set	400.00	Set		800.00
2	<b>SKY BLUE SCRUB SUIT MEDIUM</b> BLUE UNIFORM MEDIUM	6302	5 %	2 Set	400.00	Set		800.00
								1,600.00
<b>SGST 2.5%</b>								40.00
<b>CGST 2.5%</b>								40.00
Total				4 Set				₹ 1,680.00

DCDC HSPL CENTRE-DISTRICT HOSPITAL, PRAYAGRAJ  
**MATERIAL RECEIVED**  
 DATE 29-3-23  
 TIME 12:00 RECEIVED BY [Signature]

RECEIVED BY \_\_\_\_\_  
 DATE \_\_\_\_\_  
**MATERIAL RECEIVED**  
 DCDC HSPL CENTRE-DISTRICT HOSPITAL, PRAYAGRAJ

Amount Chargeable (in words) **INR One Thousand Six Hundred Eighty Only** E. & O.E

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
6302	1,600.00	2.50%	40.00	2.50%	40.00	80.00
<b>Total</b>	<b>1,600.00</b>		<b>40.00</b>		<b>40.00</b>	<b>80.00</b>

Tax Amount (in words) : **INR Eighty Only**

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**  
 for **ANCHOR FAB (2022-23)**

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

