

Tax Invoice Cum Delivery Challan



IRN : adfa96462e5448a656da3d0e37ee8ea3f4bc86f-7ecd65b2f97a6e98348c7ac7f  
 Ack No. : 182314131549071  
 Ack Date : 8-Aug-23

<p><b>ARIVATION HEALTHCARE PRIVATE LIMITED</b>                  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</p>	Invoice No. <b>AHPL/2324/180</b>	Dated <b>8-Aug-23</b>
	Delivery Note	Mode/Terms of Payment <b>30 DAYS</b>
	Reference No. & Date.	Other References
	Buyer's Order No. <b>39-082023-23158-2</b>	Dated <b>7-Aug-23</b>
	Dispatch Doc No.	Delivery Note Date
	Dispatched through <b>HAND DELIVERY</b>	Destination <b>RUBY HOSPITAL</b>
Terms of Delivery		

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	Cartridge Filter 20" Jumbo Wound FILTER 20"x4.0"	84219900	10 Pcs	300.00	Pcs		3,000.00
	<i>Igst Output</i>						540.00
<b>Total</b>							<b>₹ 3,540.00</b>

Stock/No. of Boxes Received ..... 01  
 Subject to Physical Check  
 Name/Employee Code .....  
 Centre Name ..... *RUBY HOSPITAL*  
 Date/Time ..... *07/10/23*  
 Signature ..... *[Signature]* M. No.....

Amount Chargeable (in words) **Indian Rupees Three Thousand Five Hundred Forty Only** E. & O.E

Taxable Value	IGST Rate	IGST Amount	Total Tax Amount
3,000.00	18%	540.00	540.00
<b>Total:</b> 3,000.00		<b>540.00</b>	<b>540.00</b>

Tax Amount (in words) : **Indian Rupees Five Hundred Forty Only**

Declaration  
 DL No: WB/KOL/NBO/W/320645 & WB/KOL/BO/W/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 *[Signature]*