

TAX INVOICE

(ORIGINAL FOR RECIPIENT)

Gautam Healthcare Private Limited 248, First Floor, Cycle Mkt, Jhandewalan Extension, New Delhi-110 055 9811116228 AAECG9710C DL Number-DL-MTM-145471 DT 22.06.2021 GSTIN/UIN: 07AAECG9710C1ZV State Name : Delhi, Code : 07 CIN: U85100DL2011PTC227049 E-Mail : vivek@gautamhealthcare.com	Invoice No.	Dated
	GST/24-25/1087	15-Oct-24
	Delivery Note	Mode/Terms of Payment
		30 Days
	Reference No. & Date.	Other References
Consignee (Ship to)	Buyer's Order No.	Dated
DCDC Health Services Private Limited District Hospital, Lakhimpur Khiri District Hospital, Lakhimpur Khiri Near T.B ward Hospital road, Dist, Police line, Lakhimpur, Uttar pradesh-262701 Contact No : 7309340559 State Name : Uttar Pradesh, Code : 09	87-102024-27858	4-Oct-24
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
	Terms of Delivery	
Buyer (Bill to)		
DCDC Health Services Private Limited C-185, Maypuri Industrial Area Phase-II Mayapuri New Delhi-110064 State Name : Delhi, Code : 07		

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	Hollow Fibre Dialyser B1.4P Batch : 2403102693 Expiry : 27-Aug-27	90189031	120 pcs 120 pcs	307.00	pcs	36,840.00
	CGST SGST Round Off					921.00 921.00
Total						38,682.00 ₹

Subject to Physical Check **Yes**
 Name/Employee Code **Jadav 1 Dec 2316**
 Centre Name **LMP**
 Date/Time **12/10/24 1:51:00 PM**
 Signature **Jadav** M. No. **6398736590**

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

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90189031	36,840.00	2.50%	921.00	2.50%	921.00	1,842.00
Total			921.00		921.00	1,842.00

Tax Amount (in words) : **One Thousand Eight Hundred Forty Two INR Only**

Company's PAN : **AAECG9710C**

Company's Bank Details
 A/c Holder's Name: **Gautam Healthcare Private Limited**
 Bank Name : **IDBI BANK CC A/C**
 A/c No. : **1735651100001427**
 Branch & IFS Code: **Chawri Bazar & IBKL0001735**
 for Gautam Healthcare Private Limited

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

Authorised Signatory