

TAX INVOICE

Original Buyer's Copy

**INDIA BIO-MEDICAL PRIVATE LIMITED**  
 Head office : 740 & 741, Lake Town, Block - A, Kolkata - 700 089  
 Regd. Office : 146, M. G. Road, Kolkata - 700 007  
 Factory : 1 No, Ramkrishna Soorki Mill  
 Vill : Pailan, P.S. : Bishnupur, D.H. Road, 24 PGS (South)-700104  
 Ph. : Office : 033 - 40630559 / 25349368 Factory : 033 - 24976202  
 E-mail : sanjiv.libmpvtltd@gmail.com

Invoice / Bill No. **F0437/2329** Dated **19.9.2023**

Delivery Note

Supplier's Ref. Other Reference (s)

**GSTIN/UID : 19AAACI7241L1ZB**

Buyer **DCDC HSPL CENTRE**  
**Co: RUBY GENERAL HOSPITAL**  
**Golpark, E.M. By - Govt**  
**Kolkata: 700107.**

Buyer's Order No. Dated

Despatch Document No. Dated **23699**

Despatch through **WBOJK1010** Destination

SI No.	Description of Goods	HSN CODE	Quantity	Rate ₹	Per	Amount ₹
1.	<b>NS. CONC. H.D.S. B.P. 100/120</b> <u>Normal</u> <b>3000. BC 9601</b> <u>Dental.</u>	<b>3504</b> <b>9099</b>	<b>30 Jm</b>	<b>235.00 Jm</b>		<b>7050.00</b>
2	<b>3000: BD 9597</b> <b>By - workmate powder (Bt)</b> <b>[Ex: Aug 2025]</b>	<b>60%</b>	<b>30 Jm</b>	<b>265.00 Jm</b>		<b>7950.00</b>
		<b>55%</b>		<b>@ 67.</b>		<b>900.00</b>
		<b>65%</b>		<b>@ 67.</b>		<b>900.00</b>
<b>TOTAL</b>						<b>16,800.00</b>

Amount Chargable (In Words) <b>Thousand</b> <b>and</b> <b>Sixteen</b> <b>and</b> <b>Eight</b> <b>Hundred</b> <b>only.</b>	<b>SGST</b>		<b>CGST</b>		<b>IGST</b>	
	Rate ₹	Amount ₹	Rate ₹	Amount ₹	Rate ₹	Amount ₹
HSN CODE <b>30049099</b>	<b>6%</b>	<b>900.00</b>	<b>6%</b>	<b>900.00</b>		
<b>TOTAL AMOUNT AFTER TAX</b>		<b>16800.00</b>				

**Declaration**  
 (Manufacturing Licence - DL No.: 1611M)  
 (DLNo. 9572 SW, 9396 SBW)  
 1 We declare that this Invoice Shows the actual price of the goods described & that all particulars are true.  
 2. Internet will be charge @ 24% PA after 30 days  
 3. The entire responsibility for any breakage and short age in transit lie with the buyer.  
 4. Goods once sold shall not be accepted back.

Customer's Seal & Signature **Subject to Physical Check**  
 Stock/No. of Boxes Received **60 Jm / 6 C/S**  
 Name/Employee Code **AZANAN**  
 Centre Name **R.G.H.**  
 Date/Time **19.09.23**  
 Signature **[Signature]** M. No. ....

**For INDIA BIO-MEDICAL PRIVATE LIMITED**  
**[Signature]**  
 Authorised Signatory