

2 Box



MANEXPIMP SURGICARE
Together through life

**Manexpimp Surgicare (India) Pvt.
ltd**

A-100
SECTOR 65,
NOIDA Uttar Pradesh 201301
India
GSTIN 09AALCM0495R1ZJ

ORIGINAL

TAX INVOICE

Invoice# : INV-001797 Invoice Date : 06/05/2023 Terms : Net 60 Due Date : 05/07/2023 P.O.# : 94-052023-22541-6 (42)	Place Of Supply : Delhi (07)
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Bill To DCDC Health Services Private Limited C-185, MAYAPURI INDUSTRIAL AREA PHASE -2 DELHI 110064 Delhi India GSTIN 07AAFCD0204K1Z1	Ship To PREM HOSPITAL LHDM & DR PREM HOSPITAL BISHAN SARUP COLONY OPP BUS STAND PANIPAT 132103 Haryana India 9671899298
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#	Item & Description	HSN/SAC	Qty	Rate	IGST		Amount
					%	Amt	
1	Fistula Kit OFF KIT	3005	500.00	8.50	12%	510.00	4,250.00
2	Fistula Kit ON KIT	3005	500.00	8.50	12%	510.00	4,250.00

Total In Words
Rupees Nine Thousand Five Hundred Twenty Only

THANK YOU FOR YOUR BUSINESS

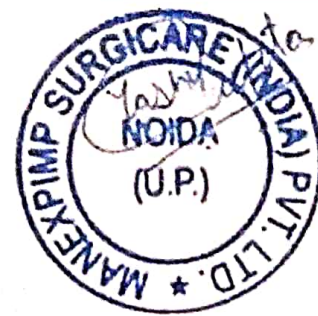
Bank Account Details:

INDUS IND BANK
ACCOUNT NO : 257668230440
IFS C : INDB0000733

Terms & Conditions

Goods once sold will not be taken back OR exchanged.
Bill not paid on due date will attract 24% interest.
All disputes subjects to ALLAHABAD Jurisdiction only.
Certified that the particulars given above is true and correct.
Price quoted is ExNoida.

Sub Total	8,500.00
IGST (12%)	1,020.00
Total	₹9,520.00
Balance Due	₹9,520.00



Authorized Signature

Stock/No. of Boxes Received *Sanjeev 2 (Box)*
 Subject to Physical Check
 Name/Employee Code
 Centre Name *Prem Hospital*
 Date/Time *12.12.23* *7105123*
 Signature *S* M. No.....

New 345 stand