

**TAX INVOICE**

(ORIGINAL FOR RECIPIENT)

**Gautam Healthcare Private Limited**  
 2nd 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.	e-Way Bill No.	Dated
GST/2324/605	791366599849	14-Sep-23
Delivery Note	Mode/Terms of Payment	
	<b>30 Days</b>	
Reference No. & Date.	Other References	
Buyer's Order No.	Dated	
95-092023-23659	6-Sep-23	
Dispatch Doc No.	Delivery Note Date	
Dispatched through	Destination	
Terms of Delivery		

**DCDC Health Services Private Limited**  
 District Hospital Lalitpur  
 Dialysis Center, Manywar Kanshiram Joint District Hospital  
 Civil Lines, Lalitpur UP, 284403  
 Contact No : 8770441244  
 State Name : Uttar Pradesh, Code : 09

**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	<b>Blu002E</b> Batch : 2301151044 Expiry : 28-Jun-26	90183990	510 pcs 510 pcs	100.00	pcs	51,000.00
2	<b>Hollow Fibre Dialyser 1.4PF</b> Batch : 2303101553 Expiry : 29-Jun-26	90189031	120 pcs 120 pcs	285.00	pcs	34,200.00
						85,200.00
<b>CGST</b>						<b>3,915.00</b>
<b>SGST</b>						<b>3,915.00</b>

*Agimex*



Stock/No. of Boxes Received ..... *22* .....  
 Subject to Physical Check  
 Name/Employee Code ..... *Divel Suroj (D102014)* .....  
 Centre Name ..... *DH Lalitpur* .....  
 Date/Time ..... *22.9.2023* ..... *4.26 PM* .....  
 Signature ..... *[Signature]* ..... M. No. *8770441244*

Total **630 pcs** **93,030.00 ₹**  
 Amount Chargeable (in words) **Ninety Three Thousand Thirty INR Only** *E. & D.E*

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90183990	51,000.00	6%	3,060.00	6%	3,060.00	6,120.00
90189031	34,200.00	2.50%	855.00	2.50%	855.00	1,710.00
<b>Total</b>	<b>85,200.00</b>		<b>3,915.00</b>		<b>3,915.00</b>	<b>7,830.00</b>

Tax Amount (in words) : **Seven Thousand Eight Hundred Thirty INR Only**

Company's PAN : **AAECG9710C**  
 Declaration : We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.  
 Company's Bank Details :  
 A/c Holder's Name : **Gautam Healthcare Private Limited**  
 Bank Name : **Axis Bank Limited**  
 A/c No. : **917020076226068**  
 Branch & IFS Code : **Jhandewalan Extension & UTIB0000738**  
 for **Gautam Healthcare Private Limited**

