

**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 08 2021  
GSTIN/UIN: 07AAECG9710C1ZV  
State Name : Delhi, Code : 07  
CIN: U85100DL2011PTC227049  
E-Mail : vivek@gautamhealthcare.com

Invoice No. **GST/2324/753** e-Way Bill No. **781379571435** Dated **30-Oct-23**  
Delivery Note  
Reference No. & Date.  
Buyer's Order No. **21-102023-23968** Dated **10-Oct-23**  
Dispatch Doc No. Delivery Note Date  
Dispatched through Destination  
Terms of Delivery

**Consignee (Ship to)**  
**DCDC Health Services Private Limited**  
Civil Hospital Gurgaon  
Civil Hospital VIKAS NAGAR BASAI SEC-10, 122001  
Contact No : 8818024273  
State Name : Haryana, Code : 06  
**Buyer (Bill to)**  
**DCDC Health Services Private Limited**  
C-185, Maypuri Industrial Area  
Phase-II  
Mayapuri  
New Delhi-110064  
State Name : Delhi, Code : 07

**Description of Goods**

SI No	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Blu002E</b> Batch : 2301151356 Expiry : 7-Sep-26	90183990	<b>780 pcs</b> 780 pcs	100.00	pcs	<b>78,000.00</b>
2	<b>Hollow Fibre Dialyser B1.4P</b> Batch : 2303101828 Expiry : 13-Jul-26	90189031	<b>144 pcs</b> 144 pcs	307.00	pcs	<b>44,208.00</b>
						1,22,208.00
						<b>5,785.20</b>
						<b>5,785.20</b>
						<b>(-)0.40</b>

**CGST**  
**SGST**  
**Round Off**

Less:

Stock/No. of Boxes Received ..... **42** .....  
Subject to Physiotherapy  
Name: **Wishna** ..... **237**  
Centre Name: **Civil Gurgaon**  
Date: **30/10/23** ..... **4:50 PM**  
Signature: **Wishna** M. No. **850605408**

Total **924 pcs** **1,33,778.00 ₹**  
E & O E

Amount Chargeable (in words) **One Lakh Thirty Three Thousand Seven Hundred Eighty Eight INR Only**

HSN/SAC	Taxable Value		CGST		SGST/UTGST		Total
	Value	Rate	Amount	Rate	Amount	Tax Amount	
90183990	78,000.00	6%	4,680.00	6%	4,680.00	9,360.00	
90189031	44,208.00	2.50%	1,105.20	2.50%	1,105.20	2,210.40	
<b>Total</b>	<b>1,22,208.00</b>		<b>5,785.20</b>		<b>5,785.20</b>	<b>11,570.40</b>	

Tax Amount (in words) : **Eleven Thousand Five Hundred Seventy INR and Forty 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 & UTI130000738**  
for Gautam Healthcare Private Limited

