

**TAX INVOICE**

(DUPLICATE FOR TRANSPORTER)

**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
<b>GST/2324/321</b>	<b>6-Jul-23</b>
Delivery Note	Mode/Terms of Payment
	<b>30 Days</b>
Reference No. & Date.	Other References
Buyer's Order No.	Dated
<b>111-072023-23106</b>	<b>5-Jul-23</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Terms of Delivery	

Consignee (Ship to)  
**DCDC Health Services Private Limited**  
 Sahara hospital  
 Janu Nagar, Simariya, Post- Kemri, Tehsil-  
 Milak, Rampur, 243701  
 Contact No : 8279538027  
 State Name : Uttar Pradesh, Code : 09

Buyer (Bill to)  
**DCDC Health Services Private Limited**  
 C-185, Mayapuri Industrial Area  
 Phase-II  
 Mayapuri  
 New Delhi-110064  
 State Name : Delhi, Code : 07

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Bain AV001 Fistula Needle 16G Dora</b> Batch : 2302100748 Expiry : 3-May-26	90189031	1,000 pcs 1,000 pcs	11.50	pcs	11,500.00
2	<b>Transducer Protector-Dora</b> Batch : 2304100163 Expiry : 26-Apr-26	90189031	500 pcs 500 pcs	6.00	pcs	3,000.00
						14,500.00
<b>CGST</b>						<b>870.00</b>
<b>SGST</b>						<b>870.00</b>
<b>Total</b>			<b>1,500 pcs</b>			<b>16,240.00 ₹</b>

*Stock/No. of Boxes Received ..... 2*  
*Subject to Physical Check*  
*Name/Employee Code Mohd. Faizi D.C 02411*  
*Centre Name Saharua Hospital*  
*Date/Time 10:00 A.M. 13/7/2023*  
*Signature [Signature] M. No. 8279538027*

Amount Chargeable (in words) **Sixteen Thousand Two Hundred Forty INR Only** E. & O.E

HSN/SAC	Taxable Value	CGST		SGST/UTGST.		Total Tax Amount
		Rate	Amount	Rate	Amount	
90189031	14,500.00	6%	870.00	6%	870.00	1,740.00
<b>Total</b>	<b>14,500.00</b>		<b>870.00</b>		<b>870.00</b>	<b>1,740.00</b>

Tax Amount (in words) : **One Thousand Seven Hundred Forty 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  
 Delhi