

TAX INVOICE **LA-261047684** (ORIGINAL FOR RECIPIENT)

<b>Gautam Healthcare Private Limited</b> 248, First Floor, Cycle Mkt, Jhandewalan Extension, New Delhi-110 055 911116228 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
	GST/24-25/123	14-May-24
Consignee (Ship to) <b>DCDC Health Services Private Limited</b> District Hospital Muzaffar Nagar District hospital Roorkee Rd Laddhawala, 251001 Contact No : 9634720912 State Name : Uttar Pradesh, Code : 09	Delivery Note	Mode/Terms of Payment
		30 Days
Buyer (Bill to) <b>DCDC Health Services Private Limited</b> C-185, Maypuri Industrial Area Phase-II Mayapuri New Delhi-110064 State Name : Delhi, Code : 07	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	44-052024-26006	4-May-24
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
	Terms of Delivery	
	<b>6 BOX</b>	

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Set for Haemodialysis Curum (Post Pump)</b> Batch : 24040022 Expiry : 31-Jan-28	90189099	150 pcs	100.00	pcs	15,000.00
			150 pcs			
						CGST 900.00
						SGST 900.00
Total						150 pcs
Total						16,800.00 ₹

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

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90189099	15,000.00	6%	900.00	6%	900.00	1,800.00
Total			900.00		900.00	1,800.00

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

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