

**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  
 E-Mail : vivek@gautamhealthcare.com

Invoice No. <b>GST/2324/69</b>	Dated <b>13-Apr-23</b>
Delivery Note	Mode/Terms of Payment <b>30 Days</b>
Reference No. & Date.	Other References
Buyer's Order No. <b>8-042023-22351-1</b>	Dated <b>5-Apr-23</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Terms of Delivery	

Consignee (Ship to)  
**DCDC Health Services Private Limited**  
 Kalra Hospital  
 A-4 5 6, Tulsi Dass Kalra Marg  
 Kirti Nagar, New Delhi-110015  
 Contact No.8051755839  
 State Name : Delhi, Code : 07

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>HOLLOW FIBRE DIALYZER ELISIO-13M</b> Batch : 23A26K2 Expiry : 30-Nov-23	90189031	<b>38 Pcs</b> 38 Pcs	500.00	Pcs	<b>19,000.00</b>
2	<b>Set for Haemodialysis Curum (Post Pump)</b> Batch : 23031139 Expiry : 28-Feb-28	90189099	<b>150 Pcs</b> 150 Pcs	100.00	Pcs	<b>15,000.00</b>
						<b>34,000.00</b>
<b>CGST</b>						<b>1,375.00</b>
<b>SGST</b>						<b>1,375.00</b>

DCDCHSPL CENTRE-KALRA HOSPITAL, KIRTI NAGAR  
**MATERIAL RECEIVED**

DATE...13.04.23  
 TIME.....4pm...RECEIVED BY.....*Vasanthi*

~~Stock/No. of Boxes Received .....  
 Subject to Physical Check .....  
 Name of the Buyer Code .....  
 Centre Name .....  
 Date .....  
 Signature .....~~

Total **188 Pcs** **36,750.00 INR**  
 E. & O.E

Amount Chargeable (in words)  
**Thirty Six Thousand Seven Hundred Fifty INR Only**

HSN/SAC	Taxable Value		Central Tax		State Tax		Total
	Value	Rate	Amount	Rate	Amount	Tax Amount	
90189031	19,000.00	2.50%	475.00	2.50%	475.00	950.00	
90189099	15,000.00	6%	900.00	6%	900.00	1,800.00	
<b>Total</b>	<b>34,000.00</b>		<b>1,375.00</b>		<b>1,375.00</b>	<b>2,750.00</b>	

Tax Amount (in words) : **Two Thousand Seven Hundred Fifty INR Only**

Company's Bank Details  
 Bank Name : **Axis Bank Limited**  
 A/c No. : **917020076226068**  
 Branch & IFS Code: **Jhandewalan Extension & UTIB0000738**  
 for **Gautam Healthcare Private Limited**

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.

