

**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 22.06.2021  
GSTIN/UIN: 07AAECG9710C1ZV  
State Name : Delhi, Code : 07  
CIN: U85100DL2011PTC227049  
E-Mail : vivek@gautamhealthcare.com

Consignee (Ship to)

**DCDC Health Services Private Limited**  
MCH Charkhi Dadri  
MCH UNIT, INFORNT OF GOVERNMENT SENIOR  
SECONDARY SCHOOL, JHADU SINGH CHOWK., 127306  
Contact No : 8860258510  
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

Invoice No. <b>GST/24-25/503</b>	Dated <b>11-Jul-24</b>
Delivery Note	Mode/Terms of Payment <b>30 Days</b>
Reference No. & Date.	Other References
Buyer's Order No. <b>108-072024-26629</b>	Dated <b>4-Jul-24</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Terms of Delivery	

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
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1	<b>Hollow Fibre Dialyser B1.4P</b> Batch : 2403101396 Expiry : 17-May-27	90189031	<b>72 pcs</b> 72 pcs	307.00	pcs	<b>22,104.00</b>
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Less :	<b>CGST</b>					<b>552.60</b>
	<b>SGST</b>					<b>552.60</b>
	<b>Round Off</b>					<b>(-)0.20</b>

③

Stock/No. of Boxes Received .....  
Subject to Physical Check .....  
Employee Code .....  
M. No. ....

Stock/No. of Boxes Received ..... **3 Box**  
Subject to Physical Check .....  
Name/Employee Code ..... **Nehe / Dco 3635**  
Centre Name ..... **MCH Dadri**  
Date/Time ..... **15 Jul 2024 10:40 AM**  
Signature ..... **Nehe** M. No. **8860258510**

Total			<b>72 pcs</b>			<b>23,209.00 ₹</b>
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Amount Chargeable (In words) **Twenty-Three Thousand Two Hundred Nine INR Only** E & O E

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90189031	22,104.00	2.50%	552.60	2.50%	552.60	1,105.20
<b>Total</b>	<b>22,104.00</b>		<b>552.60</b>		<b>552.60</b>	<b>1,105.20</b>

Tax Amount (In words) : **One Thousand One Hundred Five INR and Twenty Only**

Company's PAN : **AAECG9710C**  
Company's Bank Details  
A/c Holder's Name : **Gautam Healthcare Private Limited**  
Bank Name : **IDBI BANK CC A/C**  
A/c No. : **1735651100001427**  
Branch & IFS Code : **Chawri Bazar & IBKL0001735**

Declaration  
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

for Gautam Healthcare Private Limited  
Authorized Signatory

