

TAX INVOICE

Printed on 12-Jan-23 at 12:19  
(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  
Delhi - 110055, India  
GSTIN/UIN: 07AAECG9710C1ZV  
State Name : Delhi, Code : 07  
E-Mail : vivek@gautamhealthcare.com

Consignee (Ship to)  
**DCDC Health Services Private Limited**  
Civil Hospital Jhajjar, Jhajjar, Haryana-124106,  
Contact No : 8901880466  
Delhi - 110064, India  
State Name : Delhi, Code : 07

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

|  |                                      |                                      |
|--|--------------------------------------|--------------------------------------|
| Invoice No. <b>29</b>                      | e-Way Bill No. <b>7113 1078 9942</b> | Dated <b>11-Jan-23</b>               |
| GST/2223/854                               |                                      | Mode/Terms of Payment <b>30 Days</b> |
| Delivery Note                              |                                      | Other References                     |
| Reference No. & Date.                      |                                      |                                      |
| Buyer's Order No. <b>55-012023-21433-2</b> |                                      | Dated <b>10-Jan-23</b>               |
| Dispatch Doc No.                           |                                      | Delivery Note Date                   |
| Dispatched through                         |                                      | Destination                          |
| Terms of Delivery                          |                                      |                                      |

BD EPL

| Sl No.    | Description of Goods   | HSN/SAC  | Quantity           | Rate             | per | Amount                 |
|-----------|--|----------|--------------------|------------------|-----|------------------------|
| 1         | Set for Haemodialysis Curum (Post Pump)<br>Batch : 2212866<br>Expiry : 30-Nov-24 | 90189099 | 500 Pcs<br>500 Pcs | 100.00           | Pcs | 50,000.00              |
| 2         | Hollow Fibre Dialyser B 1.4 P<br>Batch : 2203102338<br>Expiry : 14-Oct-25        | 90189031 | 168 Pcs<br>168 Pcs | 307.00           | Pcs | 51,576.00              |
| 3         | Bain AV001 Fistula Needle 16G Dora<br>Batch : 2202101846<br>Expiry : 20-Sep-25   | 90189031 | 500 Pcs<br>500 Pcs | 11.50            | Pcs | 5,750.00               |
| 4         | Bain AVF002 Fistula Needle 17G Dora<br>Batch : 2202101903<br>Expiry : 15-Oct-25  | 90189031 | 500 Pcs<br>500 Pcs | 11.50            | Pcs | 5,750.00               |
| 5         | Infra Hep (Heparin Inj IP 25000IU)<br>Batch : HP2027<br>Expiry : 31-May-24       | 30019091 | 200 Pcs<br>200 Pcs | 135.00           | Pcs | 27,000.00              |
|           |  |          |                    |                  |     | 1,40,076.00            |
| CGST      |  |          |                    |                  |     | 6,599.40               |
| SGST      |  |          |                    |                  |     | 6,599.40               |
| Round Off |  |          |                    |                  |     | 0.20                   |
|           |  |          | <b>Total</b>       | <b>1,868 Pcs</b> |     | <b>1,53,275.00 INR</b> |

DCDC HOSPITAL CENTRE-CIVIL HOSPITAL, JHAJJAR  
MATERIAL RECEIVED  
DATE... 12/1/23  
TIME... 12:30 RECEIVED BY... *[Signature]*

*[Handwritten Signature]*

Amount Chargeable (in words) **One Lakh Fifty Three Thousand Two Hundred Seventy Five INR Only** E. & O.E

| HSN/SAC      | Taxable Value      | Central Tax |                 | State Tax |                 | Total Tax Amount |
|--------------|--------------------|-------------|-----------------|-----------|-----------------|------------------|
|              |                    | Rate        | Amount          | Rate      | Amount          |                  |
| 90189099     | 50,000.00          | 6%          | 3,000.00        | 6%        | 3,000.00        | 6,000.00         |
| 90189031     | 51,576.00          | 2.50%       | 1,289.40        | 2.50%     | 1,289.40        | 2,578.80         |
| 90189031     | 11,500.00          | 6%          | 690.00          | 6%        | 690.00          | 1,380.00         |
| 30019091     | 27,000.00          | 6%          | 1,620.00        | 6%        | 1,620.00        | 3,240.00         |
| <b>Total</b> | <b>1,40,076.00</b> |             | <b>6,599.40</b> |           | <b>6,599.40</b> | <b>13,198.80</b> |

Tax Amount (in words) : **Thirteen Thousand One Hundred Ninety Eight INR and Eighty 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  
Bank Name : **Axis Bank Limited**  
A/c No. : **917020076226068**  
Branch & IFS Code : **Jhandewalan Extension & UTIB0000738**  
for **Gautam Healthcare Private Limited**

*[Authorized Signatory Stamp]*