


TAX INVOICE

(ORIGINAL FOR RECIPIENT)

| | | |
|---|---|---------------------------|
|  GOODWILL DIAGNOSTICS Goodwill Diagnostics Property No:-14, S.F., Industrial Area Najafgarh Road, Tilak Nagar, New Delhi-110018 9643008035, 9643001224, 9643001225, 9643001230 DL No.:- DL-TLN-120177 (20B) / 120178 (21B) GSTIN/UIN: 07AAMFG6381N1ZP State Name : Delhi, Code : 07 E-Mail : goodwilldiagnostics@yahoo.com | Invoice No. GD/007181/22-23 | Dated 26-Dec-22 |
| | Delivery Note | Mode/Terms of Payment |
| | Reference No. & Date. | Other References |
| | Buyer's Order No. 28-122022-21063-8 | Dated 8-Dec-22 |
| | Dispatch Doc No. | Delivery Note Date |

Consignee (Ship to)
DCDC Health Service Pvt. Ltd.
 Civil Hospital Ambala
 Jagadhari Road Parshuram Chowk
 Sadar Bazar Ambala Cant, 133001
 Contact No : 8506000682
 State Name : Haryana, Code : 06

Buyer (Bill to)
DCDC Health Service Pvt. Ltd.
 C-185, 1st Floor,
 Mayapuri Industrial Area Phase - II
 Mayapuri, New Delhi-110064
 Tel: 8506056008
 State Name : Delhi, Code : 07

| | |
|--------------------|-------------|
| Dispatched through | Destination |
| Terms of Delivery | |

| SI No. | Description of Goods | HSN/SAC | GST Rate | Quantity | Rate | per | Disc. % | Amount |
|--------|--|--------------|----------|--|----------|--------------------|---------|--------------------|
| 1 | BM Hepacard Batch : HPC111935 Expiry : 31-Mar-23 | 30021290 | 5 % | 100 TEST 100 TEST | 11.50 | TEST | | 1,150.00 |
| 2 | BM HIV Tri-Dot (100 T) Batch : HTD112273 Expiry : 30-Oct-24 | 30021290 | 5 % | 1 KIT (100 TEST) 1 KIT (100 TEST) | 5,325.00 | KIT | | 5,325.00 |
| 3 | BM HCV Tri-Dot (100 Test)(12%) Batch : HCD112245 Expiry : 30-Oct-24 | 38221990 | 12 % | 1 KIT (100 TEST) 1 KIT (100 TEST) | 5,425.00 | KIT | | 5,425.00 |
| | | | | | | | | 11,900.00 |
| | | | | | | CGST@6% | 6 % | 325.50 |
| | | | | | | SGST@6% | 6 % | 325.50 |
| | | | | | | CGST@2.5% | 2.50 % | 161.88 |
| | | | | | | SGST@2.5% | 2.50 % | 161.88 |
| | | | | | | Rounded Off | | 0.24 |
| | | Total | | 300 TEST | | | | ₹ 12,875.00 |

DCDC HSPL CENTRE-CIVIL HOSPITAL, AMBALA CANTT.
MATERIAL RECEIVED
 DATE: 26/12/22
 TIME: 2:04 pm RECEIVED BY: *[Signature]*

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

| HSN/SAC | Taxable Value | Central Tax | | State Tax | | Total Tax Amount |
|--------------|------------------|-------------|---------------|-----------|---------------|------------------|
| | | Rate | Amount | Rate | Amount | |
| 30021290 | 6,475.00 | 2.50% | 161.88 | 2.50% | 161.88 | 323.76 |
| 38221990 | 5,425.00 | 6% | 325.50 | 6% | 325.50 | 651.00 |
| Total | 11,900.00 | | 487.38 | | 487.38 | 974.76 |

Tax Amount (in words) : **INR Nine Hundred Seventy Four and Seventy Six paise Only**
 Company's PAN : **AAMFG6381N**
 Declaration : We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.
 Customer's Seal and Signature

Company's Bank Details
 Bank Name : **Punjab National Bank (CC)**
 A/c No. : **0627008700408974**
 Branch & IFS Code: **Naraina Vihar & PUNB0062700**
 for Goodwill Diagnostics
 New Delhi-18
 Authorised Signatory
 Tilak Nagar