

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

TH Yellapura, Taluka Hospital, Yallapur,
Taluka Yallapur, Dist. Uttar Kannada, 581359
State Name : Karnataka, Code : 29

Buyer (Bill to)

DCDC Health Services Private Limited

C-185, Maypuri Industrial Area
Phase-II
Mayapuri
New Delhi-110064
State Name : Delhi, Code : 07

Invoice No.	Dated
GST/24-25/388	19-Jun-24
Delivery Note	Mode/Terms of Payment
	1 Days
Reference No. & Date	Other References
Buyer's Order No.	Dated
199-062024-26246	4-Jun-24
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Terms of Delivery	

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	AVF2516LF01E Vital 16G Batch : 2302150113 Expiry : 21-Jun-26 Batch : 2402150113 Expiry : 8-May-26	90183990	500 pcs 250 pcs 250 pcs	11.50	pcs	5,750.00
						CGST 345.00
						SGST 345.00

Amount Chargeable (in words) **Six Thousand Four Hundred Forty INR Only** Total **500 pcs** **6,440.00 ₹**
E & O E

HSN/SAC	Taxable Value		CGST		SGST/UTGST		Total
	Value	Rate	Amount	Rate	Amount	Tax Amount	
90183990	5,750.00	6%	345.00	6%	345.00	690.00	
Total	5,750.00		345.00		345.00	690.00	

Tax Amount (in words) : **Six Hundred Ninety INR 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
A/c Holder's Name : **Gautam Healthcare Private Limited**
Bank Name : **Axis Bank Limited**
A/c No. : **917020076226068**
Branch & IFS Code : **Jhandewalan Extension & UTIB0000738**
for **Gautam Healthcare Private Limited**

