

Tax Invoice

(DUPLICATE FOR TRANSPORTER)

e-Invoice



IRN : e9df3f773b621c4eb3f4136f1b1101f6a5a7aaacfe9c7cd-b63ee6533ff38c56e
 Ack No. : 172415397218347
 Ack Date : 15-Jul-24

ANCHOR FAB
 B - 4/2, Okhla Industrial Area, Phase-II, New Delhi-11
 GST NO.07ABAPS2131D1Z7
 ISO 9001:2015
 Delhi - 110020, India
 GSTIN/UIN: 07ABAPS2131D1Z7
 State Name : Delhi, Code : 07
 E-Mail : pulkit77@hotmail.com
 Consignee (Ship to)
DCDC Health Services Pvt Ltd.
 DIST. HOSPITAL AMROHA, NEAR SSP OFFICE
 AMROHA
 Uttar Pradesh - 244221, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Uttar Pradesh, Code : 09
 Buyer (Bill to)
DCDC Health Services Pvt Ltd.
 C-185, 1st Floor, Mayapuri Industrial, Area, Phase
 -2, New Delhi.
 Delhi - 110064, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

Invoice No. **AF/266/24-25**
 Dated **15-Jul-24**
 Delivery Note
 Mode/Terms of Payment
 Reference No. & Date.
 Other References
 Buyer's Order No. **52-062024-26281**
 Dated **4-Jun-24**
 Dispatch Doc No.
 Delivery Note Date
 Dispatched through
 Destination **AMROHA**
 Bill of Lading/LR-RR No.
 Motor Vehicle No. **DL03CCH0214**
 Terms of Delivery

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	SKY BLUE SCRUB SUIT SMALL BLUE UNIFORM SMALL	620429	2 Set	400.00	Set	800.00
						20.00
						20.00
			Total		2 Set	₹ 840.00

SGST 2.5%
 CGST 2.5%

No. of Boxes Received 1
 Subject to Physical Check
 Employee Code
 Name **Sobha D.02917**
 Address **DCH Amroha**
 Date **20/7/24**
 Signature **[Signature]**
 M. No. **9570868225**

Amount Chargeable (in words)
INR Eight Hundred Forty Only E. & O.E

Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
800.00	2.50%	20.00	2.50%	20.00	40.00
Total:		20.00		20.00	40.00

Tax Amount (in words) : **INR Forty Only**

Remarks:
 BILL NO : 266
 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 : **ANCHOR FAB**
 Bank Name : **HDFC BANK LTD**
 A/c No. : **03372020000609**
 Branch & IFS Code : **MAA ANANDMAYI MARG OKHALA INDL PH 22 HDFC0000337**

Customer's Seal and Signature

Prepared by _____ Verified by _____

