



IRN : 9fe301e5af79386fffe82f94b00809a9a157e83f88c8e742-b47c3926c6641072
 Ack No. : 172415969988931
 Ack Date : 8-Oct-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 DEORIA, POSTPATUM CHAURAHA DEORIA Uttar Pradesh - 274001, 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/521/24-25	Dated 8-Oct-24
	Delivery Note	Mode/Terms of Payment
Reference No. & Date.	Other References	
Buyer's Order No. 76-102024-27899	Dated 4-Oct-24	
Dispatch Doc No.	Delivery Note Date	
Dispatched through	Destination DEORIA	
Bill of Lading/LR-RR No.	Motor Vehicle No. DL2FS0010	
Terms of Delivery		

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	SKY BLUE SCRUB SUIT XL BLUE UNIFORM XL	620429	10 Set	400.00	Set	4,000.00
						100.00
						100.00
			10 Set			₹ 4,200.00

SGST 2.5%
 CGST 2.5%

Stock/No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature No. 7905232496

Amount Chargeable (in words) **INR Four Thousand Two Hundred Only** E. & O.E

Taxable Value	Central Tax		State Tax		Total Tax Amount
	Rate	Amount	Rate	Amount	
4,000.00	2.50%	100.00	2.50%	100.00	200.00
Total:		100.00		100.00	200.00

Tax Amount (in words) : **INR Two Hundred Only**

Remarks: BILL NO.521
 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 2 & HDFC0000337**

Customer's Seal and Signature
 Prepared by _____ Verified by _____
 Authorised Signatory

