IMPEX HEALTHCARE PRIVATE LIMITED

TAX INVOICE **THANK YOU FOR SAVING LIVES** - TEAM IMPEX

For any support or queries
+91 635-635-6905
support@aknamed.com

-6/5, GROUND FLOOR, OKHLA INDUSTRIAL AREA, PHASE-II,
EW DELHI, DELHI - 110020

hone No. : 1800-110-612
-Mail : ho@impexgoc.com
STIN: 07AAFCI8134F1ZM
Website - https://ihpl.net.in

.L. No.: 20B: DL-TGB-141337, 21B: DL-TGB-141338, 20B: DL-
GB-141339, 21B: DL-TGB-141340
MSME. No.: UDYAM-DL-08-0016078
SSAI. No.: 10021011000319
DPS. No.: 20F: DL-TGB-14134120, 20G: DL-TGB-141342
tate Code: 07

Bill To Address

DCDC HEALTH SERVICES PVT LTD
FIRST FLOOR, C-185, REWARI LINE INDUSTRIAL AREA, MAYAPURI, PHASE-II, NEW DELHI - 110064

PH.NO.: 8929946748
GSTIN : 07AAFCD0204K1Z1
D.L.No. :
State Code: 07

SHIP TO ADDRESS
SAME AS BILL ADDRESS

PLACE OF SUPPLY
DELHI - 07

S. Invoice No.: OK/W/24/002866
Invoice Date: 07 Apr 2023
Buyer PO: 95-032023-22206-1
Order Date.: 07 Apr 2023
SO. No.: SO/230407/1009403
Payment Term: Credit days

Payment Due Date :
L.R. No. :
Cases :
Transport :

#	Product	Manufacturer Name	HSN	Batch	Expiry	Mfg. Date	UOM	Qty	Free Qty	MRP	Rate	Disc % / Amt	Taxable Value	SGST + CGST	Total Tax	Total Amt
1	HEPARIN 25000 IU INJ 5 ML	GLAND PHARMA	30019091	101109	07/23	N/A	UNIT	200	0	297.50	106.000	0.0% / 0.00	21200.00	6.0% + 6.0%	2544.00	23744.00
	Totals							200	0				21200.00		2544.00	Rs.23,744

Tax %	Taxable value	Total Tax
12 %	Rs.21,200.00	Rs.2,544.00

Invoice Confirmed by
Rishita Singh
Apr 07, 2023 at 12:26 PM

Total Amount:	Rs.21,200.00
Cumulative Discount Amount(0.0):	Rs.0.00
Taxable Value:	Rs.21,200.00
SGST:	Rs.1,272.00
CGST:	Rs.1,272.00
IGST:	Rs.0.00
TCS(0.1%):	N.A.
Round Off:	0.00
Grand Total	Rs.23,744

(Twenty three thousand seven hundred forty four

For IMPEX HEALTHCARE PRIVATE LIMITED

Authorised signatory

Terms & Conditions

- Goods once sold will not be taken back or exchanged.
- Bills not paid due date will attract 24% interest.
- All disputes subject to jurisdication only.
- Prescribed Sales Tax declaration will be given.

Certified that the particulars given above are true and correct and the amount indicated represents the price actually charged.

Checked By _____
E.&O.E.

Stock/No. of Boxes Received 1
Subject to Physical Check
Name/Employee Code Vivek/DC0204
Centre Name DH LALITPUR
Date/Time 12/04/2023 5:50 P.M.
Signature _____ M. No. 8770441244

DCDC KIDNEY CARE * LALITPUR * DCDC-DISTT. HOSPITAL

Comments

- DELIVERY ADDRESS:-District Hospital Lalitpur Dialysis Center, Manywar Kanshiram Joint District Hospital Civil Lines, Lalitpur UP, 284403 Contact No : 8770441244

N Number: 0711746fddf2373a42717b6192d5c9ff2d4234740d356ffa71b9c4af5de47b6f