

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

Consignee (Ship to)

**DCDC Health Service Pvt. Ltd.**  
 Nayyar Hospital, 3, Dasonda Singh Rd,  
 Amritsar, 143001, Contact No : 8595955923  
 State Name : Punjab, Code : 03  
 Contact person : Tel: 8506056008  
 Contact : Tel: 8506056008

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  
 Contact person : Tel: 8506056008  
 Contact : Tel: 8506056008

Invoice No. <b>GD/00580/23-24</b>	Dated <b>19-Apr-23</b>
Delivery Note	Mode/Terms of Payment
Reference No. & Date.	Other References
Buyer's Order No. <b>120-042023-22294-4</b>	Dated <b>5-Apr-23</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Terms of Delivery	

SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	<b>BM HIV Tri-Dot (100 T)</b>  Batch : HTD032320  Expiry : 28-Feb-25 Rate of Duty : 5%	30021290	5 %	1 KIT (100 TEST) 1 KIT (100 TEST)	5,325.00	KIT		5,325.00
	Less:				2.50 % 2.50 %			133.13 133.13 (-).0.26
	CGST@2.5% SGST@2.5% Rounded Off							
	Total			1 KIT				₹ 5,591.00

Stock/No. of Boxes Received ..... 1 Box  
 Subject to Physical Check ..... 1 Box  
 Name/Employee Code ..... Agency D102592  
 Centre Name ..... Nayyar Hospital  
 Date/Time ..... 21/4/23  
 Signature ..... M. No. 7588 722149

Amount Chargeable (in words)

**INR Five Thousand Five Hundred Ninety One Only**

**₹ 5,591.00**  
E. & O.E

HSN/SAC	Taxable Value	Central Tax		State Tax		Total
		Rate	Amount	Rate	Amount	
30021290	5,325.00	2.50%	133.13	2.50%	133.13	266.26
<b>Total</b>	<b>5,325.00</b>		<b>133.13</b>		<b>133.13</b>	<b>266.26</b>

Tax Amount (in words) : **INR Two Hundred Sixty Six and Twenty Six paise Only**

Remarks:  
SID (AMRITSAR)

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.

Company's Bank Details

A/c Holder's Name : **Goodwill Diagnostics**

Bank Name : **Punjab National Bank**

A/c No. : **0627008700408974**

Branch & IFS Code : **Naraina Vihar & PUNB0062700**



Authorised Signatory