



MANEXPIMP SURGICARE  
Together through life

**Manexpimp Surgicare ( India ) Pvt.  
Ltd**

A-100  
SECTOR 65,  
NOIDA Uttar Pradesh 201301  
India  
GSTIN 09AALCM0495R1ZJ

DUPLICATE

**TAX INVOICE**

Invoice#	: INV-002162	Place Of Supply	: Delhi (07)
Invoice Date	: 21/09/2023		
Terms	: Net 60		
Due Date	: 20/11/2023		
P.O.#	: 75-092023-23708 (44)		

<b>Bill To</b>	<b>Ship To</b>
DCDC Health Services Private Limited C-185, MAYAPURI INDUSTRIAL AREA PHASE -2 DELHI 110064 Delhi India GSTIN 07AAFCD0204K1Z1	AROGYAM HOSPITAL HAZARIBAGH ZILA PARISHAD BHAWAN DISTRICT MORE 825301 Jharkhand India 8506000462

#	Item & Description	HSN/SAC	Qty	Rate	IGST		Amount
					%	Amt	
1	Fistula Kit ON KIT	3005	1,000.00	8.50	12%	1,020.00	8,500.00
2	Fistula Kit OFF KIT	3005	1,000.00	8.50	12%	1,020.00	8,500.00
3	LASA BOX	392330	6.00 /piece	340.00	18%	367.20	2,040.00

Total In Words  
**Rupees Twenty-One Thousand Four Hundred Forty-Seven  
Only**

THANK YOU FOR YOUR BUSINESS

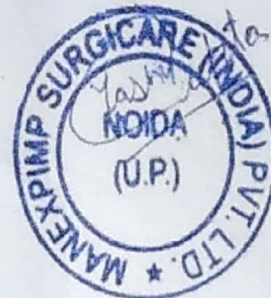
**Bank Account Details:**

INDUS IND BANK  
ACCOUNT NO : 257668230440  
IFS C : INDB0000733

**Terms & Conditions**

Goods once sold will not be taken back OR exchanged.  
Bill not paid on due date will attract 24% interest.  
All disputes subjects to ALLAHABAD Jurisdiction only.  
Certified that the particulars given above is true and correct.  
Price quoted is ExNoida.

Sub Total	19,040.00
IGST (12%)	2,040.00
IGST (18%)	367.20
Rounding	-0.20
<b>Total</b>	<b>₹21,447.00</b>
<b>Balance Due</b>	<b>₹21,447.00</b>



Authorized Signature

Stock/No. of Boxes Received ..... 3  
Subject to Physical Check  
Name/Employee Code ..... DC02373  
Centre Name ..... Arogyam Hazaribag  
Time ..... 21/09/23  
Signature ..... J.Singh M. No. 8506000462