

3 Box

Manexpimp Surgicare (India) Pvt. Ltd

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

ORIGINAL

TAX INVOICE

Invoice#	: INV-001811	Place Of Supply	: Delhi (07)
Invoice Date	: 12/05/2023		
Terms	: Net 60		
Due Date	: 11/07/2023		
P.O.#	: 50-052023-22505-4 (19)		

Bill To	Ship To
DCDC Health Services Private Limited C-185, MAYAPURI INDUSTRIAL AREA PHASE -2 DELHI 110064 Delhi India GSTIN 07AAFCD0204K1Z1	CIVIL HOSPITAL JAGADHARI VISHNU GARDEN NEAR GOVERNMENT REST HOUSE JAGADHARI (YAMUNAGAR) 135003 Haryana India 8506000536

#	Item & Description	HSN/SAC	Qty	Rate	IGST		Amount
					%	Amt	
1	Disposable Head cap	62103090	400.00 /piece	0.85	5%	17.00	340.00
2	Fistula Kit OFF KIT	3005	1,000.00	8.50	12%	1,020.00	8,500.00
3	Fistula Kit ON KIT	3005	500.00	8.50	12%	510.00	4,250.00
4	Shoe Cover (Plastic)	3924	500.00 /pair	1.90	18%	171.00	950.00

Total In Words
Rupees Fifteen Thousand Seven Hundred Fifty-Eight 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	14,040.00
IGST (5%)	17.00
IGST (12%)	1,530.00
IGST (18%)	171.00
Total	₹15,758.00
Balance Due	₹15,758.00



Stock/No. of Boxes Received 3
 Subject to Physical Check Yes
 Name/Employee Code Priyanka (DL01938)
 Centre Name C.H. Jagadhari
 Date/Time 15/5/23 10:20 Am.
 Signature [Signature] M. No. 8506000536

Authorized Signature