



MANEXPIMP SURGICARE  
Together through life

# Manexpimp Surgicare ( India ) Pvt. Ltd

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

ORIGINAL

## TAX INVOICE

Invoice# : **INV-002306**  
Invoice Date : **26/12/2023**  
Terms : **Net 60**  
Due Date : **24/02/2024**  
P.O.# : **100-122023-24510 (33)**

Place Of Supply : **Delhi (07)**

### Bill To

**DCDC Health Services Private Limited**  
C-185, MAYAPURI INDUSTRIAL AREA  
PHASE -2  
DELHI  
110064 Delhi  
India  
GSTIN 07AAFCD0204K1Z1

### Ship To

DCDC KIDNEY CARE MOTI NAGAR  
H-1 KAILSH PARK NEAR MOTI NAGAR METRO STATION  
PILLAR NO.330  
110015 Delhi  
India  
8840000500

#	Item & Description	HSN/SAC	Qty	Rate	IGST		Amount
					%	Amt	
1	LASA BOX	392330	2.00 /piece	340.00	18%	122.40	680.00

Total In Words  
**Rupees One Thousand Three Hundred Fifty-Two Only**

THANK YOU FOR YOUR BUSINESS

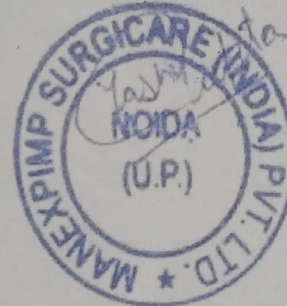
### Bank Account Details:

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	680.00
IGST (18%)	122.40
Shipping charge	550.00
Rounding	-0.40
<b>Total</b>	<b>₹1,352.00</b>
<b>Balance Due</b>	<b>₹1,352.00</b>



Authorized Signature

Stock/No. of Boxes Received ..... *21 Pkt*  
Subject to Physical Check ..... *DCDC*  
Name/Employee Code ..... *DCDC*  
Centre Name ..... *DCDC*  
Date/Time ..... *26/12/2023*  
Signature ..... *[Signature]* No. .... *8057855829*

