



MANEXPIMP SURGICARE  
Together through life

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

A-100  
SECTOR 65,  
NOIDA Uttar Pradesh 201301  
India  
GSTIN 09AALCM0495R1ZJ  
UDYAM-UP-03-0008147

ORIGINAL

**TAX INVOICE**

7886 7 Box

Invoice# : INV-002537	Place Of Supply : Delhi (07)
Invoice Date : 09/05/2024	
Terms : Net 60	
Due Date : 08/07/2024	
P.O.# : 142-052024-25992 (14)	

<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	GGH GODAVARIKHANI GOVERNMENT GENERAL HOSPITAL GODAVARIKHANI DIST PEDDAPALLI 505209 Telangana India 8500175310

#	Item & Description	HSN/SAC	Qty	Rate	IGST		Amount
					%	Amt	
1	Catheterization Kit ON KIT	3005	500.00 /piece	28.00	12%	1,680.00	14,000.00
2	Fistula Kit OFF KIT	3005	500.00	7.40	12%	444.00	3,700.00
3	Fistula Kit ON KIT	3005	500.00	7.40	12%	444.00	3,700.00

Total In Words  
**Rupees Twenty-Eight Thousand Five Hundred Thirty-Five Only**

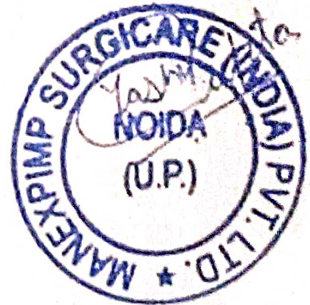
Notes  
THANK YOU FOR YOUR BUSINESS

Sub Total	21,400.00
Shipping charge (IGST (18%)) SAC: 996511	3,870.00
IGST (12%)	2,568.00
IGST (18%)	696.60
Rounding	0.40
<b>Total</b>	<b>₹28,535.00</b>
<b>Balance Due</b>	<b>₹28,535.00</b>

**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.



Authorized Signature

Stock/No. of Boxes Received 7 Boxes  
Subject to Physical Check  
Name/Employee Code Karender  
Centre Name Godavari Khani  
Date/Time 20.5.24  
Signature Karender M. No. 8500175310