



MANEXPIMP SURGICARE
Together Through Life

Manexpimp Surgicare (India) Pvt. Ltd

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

4 Box
2404

ORIGINAL

TAX INVOICE

Invoice#	: INV-002336	Place Of Supply	: Delhi (07)
Invoice Date	: 31/01/2024		
Terms	: Net 60		
Due Date	: 31/03/2024		
P.O.#	: 168-012024-24988 (16)		

Bill To	Ship To
DCDC Health Services Private Limited C-185, MAYAPURI INDUSTRIAL AREA PHASE -2 DELHI 110064 Delhi India GSTIN 07AAFCD0204K1Z1	DH BAGALKOTE BAGALKOTE DISTRICT GOVT HOSPITAL DIALYSIS UNIT NAVANAGAR VIDYAGIRI 587102 Telangana India 8722339951

#	Item & Description	MRP	HSN/SAC	Qty	Rate	IGST		Amount
						%	Amt	
1	Fistula Kit ON KIT	₹30.00	3005	800.00	7.50	12%	720.00	6,000.00
2	Fistula Kit OFF KIT	₹30.00	3005	800.00	7.50	12%	720.00	6,000.00
3	Catheterization Kit OFF KIT	₹90.00	3005	50.00 /piece	28.00	12%	168.00	1,400.00
4	Catheterization Kit ON KIT	₹90.00	3005	50.00 /piece	28.00	12%	168.00	1,400.00
5	Shoe Cover (Plastic)	₹10.00	3924	500.00 /pair	1.90	18%	171.00	950.00
6	Face Mask	₹10.00	62103090	500.00 /piece	1.57	5%	39.25	785.00
7	LASA BOX	₹550.00	392330	2.00 /piece	340.00	18%	122.40	680.00
8	Disposable Head cap	₹5.00	62103090	500.00 /piece	0.85	5%	21.25	425.00

Total In Words
Rupees Twenty-Four Thousand Two Hundred Fifty-Four Only

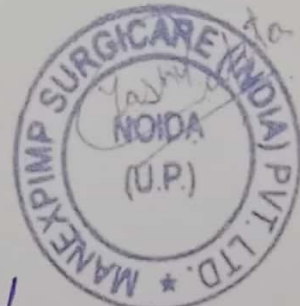
THANK YOU FOR YOUR BUSINESS

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	17,640.00
Shipping charge (IGST (18%))	3,800.00
SAC: 996511	
IGST (12%)	1,776.00
IGST (18%)	977.40
IGST (5%)	60.50
Rounding	0.10
Total	₹24,254.00
Balance Due	₹24,254.00



Stock/No. of Boxes Received 04
 Subject to Physical Check
 Name/Employee Code Fauziahamed
 Centre Name Bagalkote
 Date/Time 12.09.24 12:10 PM
 Signature [Signature] M. No. 6363476898

Authorized Signature



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DUPLICATE

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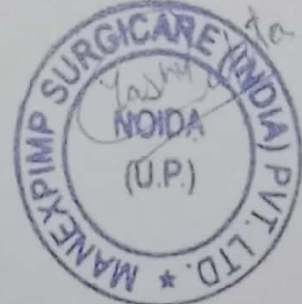
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Stock/No. of Boxes Received 04
Subject to Physical Check
Name/Employee Code Fayaz Ahmad
Centre Name Bagalkote Dist
Date/Time 1.01.2024 12:07 PM
Signature M. No. 6363476898

Authorized Signature