BACK END

Original for Buyer

Newtech Medical Devices Pvt. Ltd.

14/5, Near BMW Showroom
Main Mathura Road Faridabad Haryana, 121003
Haryana, 121003 PAN No.AAHCN1154A
Phone : 0129-2259961, MFG/MD/2023/000475
E-Mail : info@ntmdevices.com

GST INVOICE

GSTIN : 06AAHCN1154A1Z1

D.L.No.: MFG/MD/2023/000289

IRN NO : cd2 9a879ab6ca06adacb906786c63171332a9c3027221a47d657299a8812a79d2

Bill To
DCDC HEALTH SERVICES PRIVATE LIMITED
First Floor, C-185, Rewari Line Industrial
Area, Mayapuri, Phase-II, New Delhi, 110064
CONTECT PERSON-MR. RAMESH
Phone No.:8851337558,9999866375
D.L.No.:
GSTIN : 07AAFCD0204K1Z1 PAN NO :AAFCD0204K

Ship To
DCDC DIALYSIS CENTRE,DH KARWAR,DISTRICT
CIVIL HOSPITAL KARWAR, DIALYSIS UNIT,581301
Karnataka MOB,8746959190

Invoice No.:NTMPL24-25/01855 Date : 28-06-2024
P.O.No. : 159-062024-26322 P.O.Date : 04-06-2024
Terms Of Payment : 60 days
Dispatch Through : BY SURFACE
Destination : TRACKON
Other Ref. : YASHIKA
EWAYBILL. :

S.no	Product	MRP	HSN	QTY	RATE	DIS%	GST%	Amount
1	TRANSDUCER PROTECTOR STANDARD Mfg:- 4/24 Exp:- 3/27 Batch:- 24040101 ITEM CODE:- OTHERS	80.00	90183990	600 PCS	4.000	0.00	12.00	2400.00

IGST 2400*12%=288IGST.

TOTAL QTY: 600.00

SUB TOTAL	2400.00
IGST 12 %	288.00
TCS 0.000%	0.00
GRAND TOTAL	2688.00

Rs. Two Thousand Six Hundred Eighty Eight Only

Terms & Conditions
1.Cash payment is not acceptable.Please send the payment only through cheque/DD/RTGS/NEFT in favour of NEWTECH MEDICAL DEVICES PVT.LTD payable at Faridabad.Please pay on or before due date otherwise 24% interest per annum will be chargd
Please turn over for further terms and conditions. All Subject to Faridabad Jurisdiction.
Tax payable under reverse charge (Yes/No) = "No"
Certified that the particulars given above are true and correct Checked By

For Newtech Medical Devices Pvt. Ltd.

Newtech Medical Devices Pvt. Ltd. Faridabad (Haryana)

Authorised signatory

BANK DETAILS

A/C NAME : NEWTECH MEDICAL DEVICES PVT. LTD.
Bank Name : Kotak Mahindra Bank Ltd.
Branch : Sector -16, Faridabad
A/c No : 8748965988
IFSC : KKBK0000286

REMARKS :
PO/159-062024-26322

NTMPI/01834
28.06.2024

Stock/No. of Boxes Received 1 box
Subject to Physical Check
Name/Employee Code DC03441
Centre Name Karwar
Date/Time 16/7/24
Signature M. No. 7892136819

DCDC KIDNEY CARE CENTRE KARWAR