

**TAX INVOICE**

(ORIGINAL FOR RECIPIENT)

**Gautam Healthcare Private Limited**  
 245, First Floor, Cycle Mkt,  
 Jhandewalan Extension,  
 New Delhi-110 055  
 9811116228  
 AAECG9710C  
 DL Number-DL-MTM-145471 DT 22.06.2021  
 GSTIN/UIN: 07AAECG9710C1ZV  
 State Name : Delhi, Code : 07  
 CIN: U85100DL2011PTC227049  
 E-Mail : vivak@gautamhealthcare.com

Consignee (Ship to)  
**DCDC Health Services Private Limited**  
 District Hospital, Lakhimpur Khiri  
 District Hospital, Lakhimpur Khiri, Near T.B ward Hospital road,  
 Dist, Police line, Lakhimpur, Uttar pradesh 262701  
 Contact No : 6393323652  
 State Name : Uttar Pradesh, Code : 09

Buyer (Bill to)  
**DCDC Health Services Private Limited**  
 C-185, Mayapuri Industrial Area  
 Phase-II  
 Mayapuri  
 New Delhi-110064  
 State Name : Delhi, Code : 07

Invoice No. GST/2324/1160	e-Way Bill No. 701396154062	Dated 8-Jan-24
Delivery Note	Reference No. & Date.	Mode/Terms of Payment 30 Days
Buyer's Order No. 87-012024-24771	Dispatch Doc No.	Other References
Dispatched through	Destination	Dated 5-Jan-24
Terms of Delivery		Delivery Note Date

HSN/SAC	Quantity	Rate	per	Amount
90183990	150 pcs 150 pcs	100.00	pcs	15,000.00
90189031	120 pcs 120 pcs	307.00	pcs	36,840.00
90183990	1,000 pcs 1,000 pcs	11.50	pcs	11,500.00
				63,340.00
				2,511.00
				2,511.00

SI No.	Description of Goods	CGST	SGST
1	<b>Blu002E</b> Batch : 2301151731 Expiry: 14-Nov-26		
2	<b>Hollow Fibre Dialyser B1.4P</b> Batch : 2303101659 Expiry: 11-Jul-26		
3	<b>AVF2516LF01E Vital 16G</b> Batch : 2302150264 Expiry: 10-Oct-26		
<b>Total</b>			

Stock/No. of Boxes Received ..... 11 box .....  
 Subject to Physical Check  
 Name/Employee Code ..... R.M. / DC02020  
 Centre Name ..... D.H. LAKHIMPUR  
 Date/Time ..... 11/01/24 ..... 10:30 AM  
 Signature ..... [Signature] ..... M. No. 9670948337

Amount Chargeable (in words)  
**Sixty Eight Thousand Three Hundred Sixty Two INR Only**

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90183990	26,500.00	6%	1,590.00	6%	1,590.00	3,180.00
90189031	36,840.00	2.50%	921.00	2.50%	921.00	1,842.00
<b>Total</b>	<b>63,340.00</b>		<b>2,511.00</b>		<b>2,511.00</b>	<b>5,022.00</b>

Tax Amount (in words) : **Five Thousand Twenty Two INR Only**

Company's PAN : AAECG9710C

Company's Bank Details  
 Bank Name : Axis Bank Limited  
 A/C No. : 917020076226068  
 Branch & IFS Code: Jhandewalan Extension & UTIB0000738  
 for Gautam Healthcare Private Limited

Declaration  
 We declare that this Invoice shows the actual price of the goods described and that all particulars are true and correct.

