

**TAX INVOICE**

(ORIGINAL FOR RECIPIENT)

**Gautam Healthcare Private Limited**  
 248, First Floor, Cycle Mkt,  
 Jhandewalan Extension,  
 New Delhi-110 055  
 9811128228  
 AAECG9710C  
 DL Number-DL-MTM-145471 DT 22.06.2021  
 GSTIN/UIN: 07AAECG9710C1ZV  
 State Name : Delhi, Code : 07  
 CIN: U85100DL2011PTC227049  
 E-Mail : vivek@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/2324/499	e-Way Bill No. 731359944131	Dated 16-Aug-23
Delivery Note	Mode/Terms of Payment <b>30 Days</b>	
Reference No. & Date.	Other References	
Buyer's Order No. 87-082023-23377	Dated 7-Aug-23	
Dispatch Doc No.	Delivery Note Date	
Dispatched through	Destination	
Terms of Delivery		

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Hollow Fibre Dialyser B1.4P</b> Batch : 2303101353 Expiry : 18-Jun-26	90189031	120 pcs 120 pcs	307.00	pcs	36,840.00
2	<b>AVF2516LF01E Vital 16G</b> Batch : 2302150041 Expiry : 11-May-26	90183990	500 pcs 500 pcs	11.50	pcs	5,750.00
3	<b>Bain AVF002 Fistula Needle 17G Dora</b> Batch : 2302100898 Expiry : 29-May-26	90189031	500 pcs 500 pcs	11.50	pcs	5,750.00
						48,340.00
<b>CGST</b>						1,611.00
<b>SGST</b>						1,611.00
<b>Total</b>			<b>1,120 pcs</b>			<b>51,562.00 ₹</b>

*490 pcs  
and quality*

Stock/No. of Boxes Received ..... *7 box* .....  
 Subject to Physical Check  
 Name/Employee Code ..... *9090* .....  
 Centre Name ..... *District Hospital Lakhimpur* .....  
 Date/Time ..... *19/8/2023* .....  
 Signature ..... *[Signature]* ..... M. No. *9670948237*

Amount Chargeable (in words) **Fifty One Thousand Five Hundred Sixty Two INR Only** E. & O.E

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90189031	36,840.00	2.50%	921.00	2.50%	921.00	1,842.00
90183990	5,750.00	6%	345.00	6%	345.00	690.00
90189031	5,750.00	6%	345.00	6%	345.00	690.00
<b>Total</b>			<b>1,611.00</b>		<b>1,611.00</b>	<b>3,222.00</b>

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

Company's PAN : **AAECG9710C**

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

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

for Gautam Healthcare Private Limited  
 Delhi  
 Authorized Signatory

