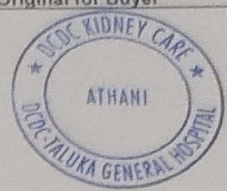
**Newtech Medical Devices Pvt. Ltd.**

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



GSTIN : 06AAHCN1154A1Z1

GST INVOICE

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

Bill To	Ship To	IRN NO. : 36b27bd78fd77d6e8606597e17bca25233d1fa489c20a85fd7bcded5a1299db5
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	DCDC Health Services Pvt Ltd TH Athani, Taluka General Hospital, Athani Dialysis Unit, Near Karanatak Bank Miraj Road Basvareshwar, Circle, 591304 PH- 8618706258	Invoice No.:NTMPL23-24/18046 Date : 25-01-2024 P.O.No. : 169-012024-2500 P.O.Date : 24-01-2024 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 Batch:- 23050201 Mfg:- 5/23 Exp:- 4/26 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 charged. Please turn over for further terms and conditions. All Subject to Faridabad Jurisdiction. Tax payable under reverse charge (Yes/No) = "No"

For Newtech Medical Devices Pvt. Ltd.

Certified that the particulars given above are true and correct

Checked By _____

Authorised signatory

**BANK DETAILS**

A/C NAME : NEWTECH MEDICAL DEVICES PVT. LTD.
Bank Name : HDFC BANK
Branch : SECTOR-21C,FARIDABAD
A/c No : 50200077322740
IFSC : HDFC0000615

REMARKS :

PO- 169-012024-25001

NTMPI/05273
25.01.24

Stock/No. of Boxes Received 01.....

Subject to Physical Check

Name/Employee Code

Centre Name C.H. Athani

Date/Time 13-01-24 9:16

Signature M. No. 962071513

