



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	IRRNNO : 692350442fe32b6eb04eaddc40b047765d24881c448106ae958e07c5cc35129
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 : 07AAFC0204K1Z1 PAN NO :AAFC0204K	DCDC DIALYSIS CENTRE CHC Aswaraopet DCDC DCDC dialysis centre govt hospital,aswaraopet bhadradi kothagudem,Telangana-507301,9121447080	Invoice No.: NTMPL24-25/02227 Date : 15-07-2024 P.O.No. : 126-072024-2659 P.O.Date : 04-07-2024 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:- 24040101 Mfg:- 4/24 Exp:- 3/27 ITEM CODE:- OTHERS	80.00	90183990	200 PCS	4.000	0.00	12.00	800.00
	ODA CHARGES						12.00	500.00

IGST 1300*12%=156IGST,

TOTAL QTY: 200.00

SUB TOTAL 1300.00

IGST 12 % 156.00

TCS 0.000% 0.00

GRAND TOTAL 1456.00

Rs. One Thousand Four Hundred Fifty Six 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 : Kotak Mahindra Bank Ltd.
Branch : Sector -16, Faridabad
A/c No : 8748965988
IFSC : KKBK0000286

Stock/No. of Boxes Received 1
Subject to Physical Check
Name/Employee Code K. Praveen (DCO1936)
Centre Name Aswaraopet
Date/Time 28.7.24
Signature M. No.....

REMARKS :

PO/126-072024-26598

 NTMPI/02179
12.07.2024