

TAX INVOICE

(ORIGINAL FOR RECIPIENT)

**Gautam Healthcare Private Limited**  
 248, 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  
 PIN: U85100DL2011PTC227049  
 E-Mail : vivek@gautamhealthcare.com

Consignee (Ship to)  
**DCDC Health Services Private Limited**  
 ESIC Hospital Ahmedabad  
 ESIC MODEL HOSPITAL CHANDRA SHEKHAR AZAD  
 ROAD BAPU NAGAR, 380024  
 Contact No : 6352516728  
 State Name : Gujarat, Code : 24

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

Invoice No.	Dated
<b>GST/2324/313</b>	<b>30-Jun-23</b>
Delivery Note	Mode/Terms of Payment
	<b>30 Days</b>
Reference No. & Date.	Other References
Buyer's Order No.	Dated
<b>25-062023-23075-1</b>	<b>30-Jun-23</b>
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination

Terms of Delivery

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Hollow Fibre Dialyser B1.4P</b> Batch : 2303100012 Expiry: 10-Jan-26	90189031	96 pcs	307.00	pcs	29,472.00
2	<b>Hollow Fibre Dialyser 1.4PF</b> Batch : 2303100815 Expiry: 18-Apr-26	90189031	48 pcs	285.00	pcs	13,680.00
						43,152.00
<b>CGST</b>						<b>1,078.80</b>
<b>SGST</b>						<b>1,078.80</b>
<b>Round Off</b>						<b>0.40</b>
<b>Total</b>						<b>45,310.00 ₹</b>

Stock/No. of Boxes Received ..... **6**  
 Subject to Physical Check  
 Name/Employee Code ..... **DC0274**  
 Centre Name ..... **ESIC Ahmedabad**  
 Date/Time ..... **5/7/2023 12:14:00 pm**  
 Signature **[Signature]** ..... M. No. **7898967194**

Amount Chargeable (In words) **Forty-Five Thousand Three Hundred Ten INR Only** E. & O.E

HSN/SAC	Taxable Value	CGST		SGST/UTGST		Total Tax Amount
		Rate	Amount	Rate	Amount	
90189031	43,152.00	2.50%	1,078.80	2.50%	1,078.80	2,157.60
<b>Total</b>	<b>43,152.00</b>		<b>1,078.80</b>		<b>1,078.80</b>	<b>2,157.60</b>

Tax Amount (In words) : **Two Thousand One Hundred Fifty Seven INR and Sixty 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  
 Bank Name : **Axis Bank Limited**  
 A/c No. : **917020076226068**  
 Branch & IFS Code : **Jhandewalan Extension & UTIB0000733**  
 for Gautam Healthcare Private Limited  
 Delhi  
 Authorised Signatory

This is a Computer Generated Invoice