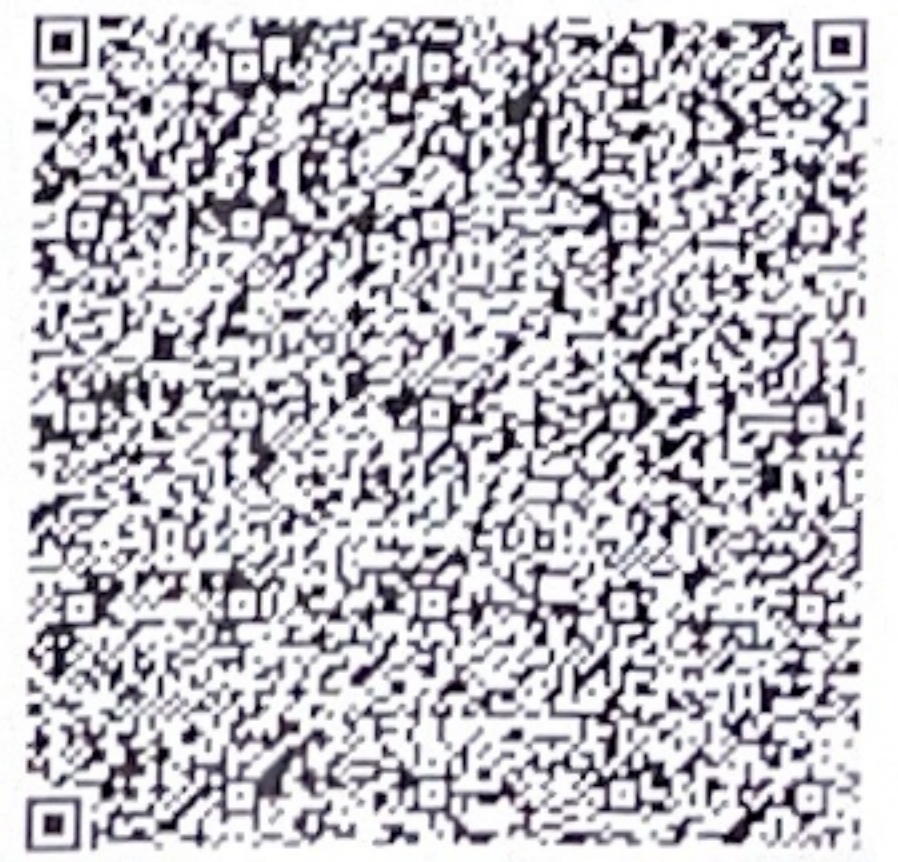


Tax Invoice Cum Delivery Challan

e-Invoice



IRN : d358708cef9d019aaeaa081df87e32320493caee979999-  
e73cfb7cfb2fdb8a6  
Ack No. : 182415724701646  
Ack Date : 12-Mar-24

<b>ARIVATION HEALTHCARE PRIVATE LIMITED</b> Site Office: 16/24 Dr. Suresh Chandra Banerjee Road KOLKATA Kolkata WB KOLKATA-700010 GSTIN/UIN: 19AASCA6131H1ZF State Name : West Bengal, Code : 19 Contact : 6289556902,9836667979 E-Mail : arivationhealthcare@gmail.com	Invoice No.	Dated
	<b>AHPL/2324/547</b>	<b>12-Mar-24</b>
	Delivery Note	Mode/Terms of Payment
		<b>30 DAYS</b>
	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	<b>83-032024-25596</b>	<b>11-Mar-24</b>
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
	<b>DELHIVERY</b>	<b>Mewat</b>
Vessel/Flight No.	Place of receipt by shipper:	
City/Port of Loading	City/Port of Discharge	
Terms of Delivery		

Consignee (Ship to)  
**DCDC Health Service Pvt. Ltd.**  
 SHKM Govt Medical College, Nalhar, Mewat Haryana,  
 122107  
 Contact No : 8929946746  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Haryana, Code : 06

Buyer (Bill to)  
**DCDC Health Service Pvt. Ltd.**  
 C-185, Mayapuri Industrial Area phase- 2, Mayapuri,  
 New Delhi-110064  
 GSTIN/UIN : 07AAFCD0204K1Z1  
 State Name : Delhi, Code : 07  
 Place of Supply : Delhi

05


SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	<b>DIALYZER 1.6 OCI HD16L</b> Batch : 230936 Expiry : 15-Sep-26	90189031	<b>120 Pcs</b> 120 Pcs	290.00	Pcs		<b>34,800.00</b>
	<b>Igst Output</b>						<b>1,740.00</b>
	Total		<b>120 Pcs</b>				<b>₹ 36,540.00</b>

Stock/No. of Boxes Received **5 BOX**  
 Subject to Physical Check  
 Name/Employee Code **Shyamant (2100890)**  
 Centre Name **SHKM Mewat**  
 Date/Time **14-3-24 11:30 AM**  
 Signature **[Signature]** M. No. **7097270724**

Amount Chargeable (in words)  
**Indian Rupees Thirty Six Thousand Five Hundred Forty Only**

Company's Bank Details  
 A/c Holder's Name : ARIVATION HEALTHCARE PRIVATE LIMITED  
 Bank Name : Union Bank of India  
 A/c No. : 015225010000001  
 Branch & IFS Code : Dharmatolla Branch & UBIN0530131  
 SWIFT Code : UBININBOCL

Declaration  
 DL No: WB/KOL/NBO/W/320645 & WB/KOL/BO/W/320645  
 MSME UAM No. WB10D0023343  
 Interest @24% PA will be charged after credit period  
 Goods once sold will not be taken back or exchanged

for ARIVATION HEALTHCARE PRIVATE LIMITED  


SUBJECT TO KOLKATA JURISDICTION  
 This is a Computer Generated Invoice