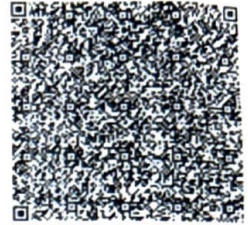


Tax Invoice Cum Delivery Challan

e-Invoice



IRN : 70fce7d9f87e3534e591080e15f31b2e9e68c4a-c35a0e0a904d2ab0255657ee9
 Ack No. : 182415334562233
 Ack Date : 22-Jan-24

<p>ARIVATION DialysisGPS</p>	<p>ARIVATION HEALTHCARE PRIVATE LIMITED 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 www.arivation.com</p>	Invoice No. e-Way Bill No. Dated AHPL/2324/429 851378902214 22-Jan-24
		Delivery Note Mode/Terms of Payment Reference No. & Date. Other References Buyer's Order No. Dated 145-012024-24867 10-Jan-24 Dispatch Doc No. Delivery Note Date Dispatched through Destination DELHIVERY Hyderabad, Terms of Delivery
Consignee (Ship to) DCDC Health Service Pvt. Ltd. Gandhi Hospital, Bhoiguda Musheerabad, Hyderabad, 500020; Contact No : 7793985614 GSTIN/UIN : 07AAFCD0204K1Z1 State Name : Telangana, Code : 36		
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		

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	CUT FILTER CF609N Batch : 23H21 Expiry: 20-Aug-26	90189099	24 Pcs 24 Pcs	3,850.00	Pcs		92,400.00
	<i>IGST Output</i>						11,088.00
Total			24 Pcs				1,03,488.00

Stock/No. of Boxes Received 02
 Subject to Physical Check
 Name/Employee Code .. M. Suman / DC02882
 Centre Name .. Gandhi ..
 Date/Time .. 29-1-24 .. 4:30 PM
 Signature M. No.....



Amount Chargeable (in words)	Indian Rupees One Lakh Three Thousand Four Hundred Eighty Eight Only		
	Taxable Value	IGST Rate	Total Tax Amount
	92,400.00	12%	11,088.00
	Total: 92,400.00		11,088.00

Tax Amount (in words) : **Indian Rupees Eleven Thousand Eighty Eight Only**

Declaration
 DL No: WB/KOL/NBOW/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

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 & UBIN0901521**
 SWIFT Code : **UEININBBOCL**

Customer's Seal and Signature

for ARIVATION HEALTHCARE PRIVATE LIMITED

 Authorized Signatory

