

Manexpimp Surgicare (India) Pvt.

A-100 SECTOR 65, NOIDA Uttar Pradesh 201301 GSTIN 09AALCM0495R1ZJ

DUPLICATE **TAX INVOICE**

Invoice#

Invoice Date

Terms

Due Date P.O.#

: INV-002395 : 17/02/2024

: Net 60 : 17/04/2024

: 204-022024-25063 (2)

Place Of Supply

: Delhi (07)

Bill To

DCDC Health Services Private Limited

C-185, MAYAPURI INDUSTRIAL AREA

PHASE -2 **DELHI**

110064 Delhi

GSTIN 07AAFCD0204K1Z1

Ship To

DCDC KIDNEY CARE KRISHNA NAGAR

DCDC HEALTH SERVICES PVT LTD 451-452 FIRST FLOOR MAIN

ROAD JHEEL KUKRENJA OPP TANEJA DIARY

110051 Delhi

India

8130012791

| # | Item & Description | HSN/SAC 392330 | Qty 140.00 /piece | Rate 270.00 | IGST | | |
|--|--------------------|-------------------|--------------------------------|---|------------------------------|---------------------|-------------------------|
| | | | | | % 18% | Amt 6,804.00 | Amount 37,800.00 |
| 1 | DIALYZER BOX | | | | | | |
| | Total In Words | | | | Sub Total Shipping charge | | |
| Rupees Forty-Six Thousand Seven Hundred Twenty-Eight Only | | | | (IGST (18%)) SAC: 996511 IGST (18%) | | | 1,800.00 |
| | | | | | | | 7,128.00 |
| THANK YOU FOR YOUR BUSINESS | | | | Total | | | ₹46,728.00 |

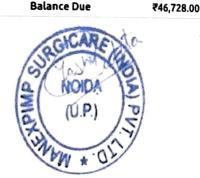
Bank Account Details:

INDUS IND BANK

ACCOUNT NO: 257668230440

IFS C: INDB0000733

Terms & Conditions Goods once sold will not be taken back OR exchanged. Bill not paid on due date will attract 24% interest. All disputes subjects to ALLAHABAD Jurisdiction only. Certified that the particulars given above is true and correct. Price quoted is ExNoida.



Authorized Signature

Stock/No. of Boxes Received ... 13. DOX &s Subject to Physical Check Subject to Physical Oliver Mane/Employee Code Municipal No. 120012 79 1

