		TAX INVOICE		(ORIGINA	LFOR	RECIPIENT)	
Ga	autam Healthcare Private Limited	Invoice	No.	Dated			
24	8,First Floor,Cycle Mkt,	GST/2	2324/20	1-Ap			
	dewalan Extension, Delhi-110 055 1116228 CG9710C Jumoer-DL-MTM-145471 DT 22.06.2021 IJV/UIN: 07AAECG9710C1ZV		Delivery Note  Reference No. & Date.		Mode/Terms of Payment		
8					30 Days		
OL SS					Other References		
St:	ate Name : Delhi, Code : 07 Mail : vivek@gautamhealthcare.com	Buyer'	s Order No.	Dated			
0	onsignee (Ship to)	95-03	95-032023-22260-1		31-Mar-23		
	CDC Health Services Private Limited strict Hospital Lalitpur lysis Center, Manywar Kanshiram Joint District Hospital vil Lines, Lalitpur UP, 284403		Dispatch Doc No.  Dispatched through		Delivery Note Date  Destination		
ia							
St	ontact No : 8770441244 ate Name : Uttar Pradesh, Code : 09 eyer (Bill to)	Terms	of Delivery				
C- Ph Ma	CDC Health Services Private Limited 185,Maypuri Industrial Area nase-II ayapuri ew Delhi-110064						
SI	ate Name : Delhi, Code : 07  Description of Goods	HSN/S	SAC Quantity	Rate	per	Amount	
0.	Hollow Fibre Dialyser B1.4P	90189	031 <b>120 pc</b>	s 307.00	pcs	36,840.0	
	Batch : 2203102736 Expiry : 10-Dec-25		120 pc	s			
		6657				921.0	
		CGST SGST				921.0	
						-	
				1/19	Q.	Sari	
		COCDICTION	STEPLAL	O WHITE	w	jele Servi	
		Manufactor 25.2	ONTE ME 3.	ere ere			
		Total	120 pc			38,682.00 IN	

Company's PAN

Thirty Eight Thousand Six Hundred Eighty Two INR Only

Central Tax Total HSN/SAC Taxable State Tax Rate Rate Amount Value Amount Tax Amount 921.00 2.50% 90189031 36,840.00 2.50% 921.00 1,842.00 Total 36,840.00 921.00 921.00 1,842.00

Tax Amount (in words): One Thousand Eight Hundred Forty Two INR Only

Company's Bank Details

Bank Name : Axis Bank Limited

A/c No. 917020076226068

Branch & IFS Code: Jhandewalan Extension & UTIB0000738

for Gautam Healthcare Private Limited

horised Signatory

Declaration We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

: AAECG9710C