

TAX INVOICE

(ORIGINAL FOR RECIPIENT)

ATM-145471 DT 22.06.2021
AAECG9710C12V
Delhi, Code : 07
COL2011PTC227049
vivek@gautamhealthcare.com

Invoice No. e-Way Bill No. Dated
GST/2324/748 701379214060 28-Oct-23
 Delivery Note Mode/Terms of Payment
30 Days
 Reference No. & Date. Other References
 Buyer's Order No. Dated
23-102023-24074 28-Oct-23
 Dispatch Doc No. Delivery Note Date
 Dispatched through Destination
 Terms of Delivery

Consignee (Ship to)
DCDC Health Services Private Limited
 Civil Hospital Jind
 CIVIL HOSPITAL JIND GOHANA ROAD, 126102
 Contact No : 8295012840
 State Name : Haryana, Code : 06
 Buyer (Bill to)

DCDC Health Services Private Limited
 C-185, Mayapuri Industrial Area
 Phase-II
 Mayapuri
 New Delhi-110064
 State Name : Delhi, Code : 07

Sl No	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	OCI-HD140L Batch : 230753 Expiry : 31-Jul-26	90189031	312 pcs 312 pcs	295.00	pcs	92,040.00
						CGST 2,301.00
						SGST 2,301.00
Total						312 pcs 96,642.00 ₹

Stock/No. of Boxes Received 312
 Subject to Physical Check
 Name/Employee Code Shubham
 Centre Name DCDC CIVIL JIND
 Date/Time 27-10-23
 Signature [Signature] M. No. 8295012840

Amount Chargeable (in words)

Ninety Six Thousand Six Hundred Forty Two INR Only

HSN/SAC	Taxable Value	Rate	CGST Amount	SGST/UTGST Rate	Amount	Total Tax Amount
90189031	92,040.00	2.50%	2,301.00	2.50%	2,301.00	4,602.00
Total	92,040.00		2,301.00		2,301.00	4,602.00

Tax Amount (in words) : **Four Thousand Six Hundred Two INR 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

A/c Holder's Name : **Gautam Healthcare Private Limited**
 Bank Name : **Axis Bank Limited**
 A/c No : **917020076226068**
 Branch & IFS Code : **Jhandewalan Extension & UTIB0000738**
 for Gautam Healthcare Private Limited

Authorised Signatory