

MANEXPIMP SURGICARE  
Respect your through care

### Manexpimp Surgicare ( India ) Pvt. Ltd

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

DUPLICATE

## TAX INVOICE

Invoice# : INV-002003  
Invoice Date : 29/07/2023  
Terms : Net 60  
Due Date : 27/09/2023  
P.O.# : 41-072023-22959 (10)

Place Of Supply : Delhi (07)

#### Bill To

**DCDC Health Services Private Limited**  
C-185, MAYAPURI INDUSTRIAL AREA  
PHASE -2  
DELHI  
110064 Delhi  
India  
GSTIN 07AAFCD0204K1Z1

#### Ship To

DISTRICT HOSPITAL GHAZIABAD  
DISTRICT COMBINED HOSPITAL SEC 23  
201001 Uttar Pradesh  
India  
8506002727

#	Item & Description	MRP	HSN/SAC	Qty	Rate	IGST		Amount
						%	Amt	
1	Catheterization Kit ON KIT	₹70.00	3005	50.00 /piece	35.00	12%	210.00	1,750.00
2	Catheterization Kit OFF KIT	₹70.00	3005	50.00 /piece	32.00	12%	192.00	1,600.00

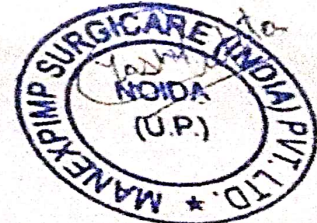
Total In Words  
**Rupees Three Thousand Seven Hundred Fifty-Two Only**

Sub Total	3,350.00
IGST (12%)	402.00
<b>Total</b>	<b>₹3,752.00</b>
<b>Balance Due</b>	<b>₹3,752.00</b>

THANK YOU FOR YOUR BUSINESS

### Bank Account Details:

INDUS IND BANK  
ACCOUNT NO : 257668230440  
IFS C : INDB0000733



Authorized Signature

**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.

Stock/No. of Boxes Received *8 Box 2 com*  
Subject to Physical Check *ok*  
Name/Employee Code *Mechid 1238*  
Centre Name *CLB*  
Date/Time *21/11/24 11:13*  
Signature *[Signature]* M. No. *9528252860*