



MANEXPIMP SURGICARE
Together through life

Manexpimp Surgicare (India) Pvt. Ltd

A-100
SECTOR 65,
NOIDA Uttar Pradesh 201301
India
GSTIN 09AALCM0495R1ZJ
UDYAM-UP-03-0008147

ORIGINAL

TAX INVOICE

Invoice#	: INV-002538	Place Of Supply	: Delhi (07)
Invoice Date	: 09/05/2024		
Terms	: Net 60		
Due Date	: 08/07/2024		
P.O.#	: 145-052024-26003 (16)		

Bill To	Ship To
DCDC Health Services Private Limited C-185, MAYAPURI INDUSTRIAL AREA PHASE -2 DELHI 110064 Delhi India GSTIN 07AAFCD0204K1Z1	GH GANDHI HOSPITAL SECBAD GANDHI HOSPITAL BHOIGUDA MESHEERABAD DIST HYDERBAD 500020 Telangana India 7793985614

#	Item & Description	HSN/SAC	Qty	Rate	IGST		Amount
					%	Amt	
1	Catheterization Kit ON KIT	3005	500.00 /piece	28.00	12%	1,680.00	14,000.00
2	Fistula Kit ON KIT	3005	1,000.00	7.40	12%	888.00	7,400.00
3	Fistula Kit OFF KIT	3005	1,500.00	7.40	12%	1,332.00	11,100.00

Total In Words
Rupees Forty-One Thousand Sixty-One Only

Notes

THANK YOU FOR YOUR BUSINESS

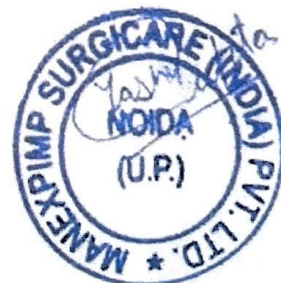
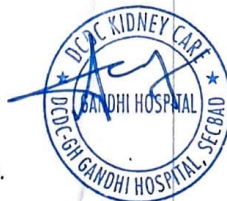
Bank Account Details:

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.

Sub Total	32,500.00
Shipping charge (IGST (18%))	3,950.00
SAC: 996511	
IGST (12%)	3,900.00
IGST (18%)	711.00
Total	₹41,061.00
Balance Due	₹41,061.00



Stock No. of boxes Received 09
Subject to Physical Check
Name/Employee Code M. Juman / PC 2222
Centre Name Gandhi
Date/Time 25-5-24 / 2:00 PM
Signature M. No.
Authorized Signature