

Tax Invoice

(DUPLICATE FOR TRANSPORTER)

e-Invoice



IRN : 28a64ed95d53f7b60d2ac7f9864c02786d0eb934e6c43.
 31b9f917bf911a5d0cc
 Ack No : 172415397646452
 Ack Date : 15-Jul-24

ANCHOR FAB

B - 4/2, Okhla Industrial Area, Phase II, New Delhi-11
 GST NO 07ABAPS2131D1Z7
 ISO 9001:2015
 Delhi - 110020, India
 GSTIN/UIN : 07ABAPS2131D1Z7
 State Name : Delhi, Code : 07
 E-Mail : pulkit77@hotmail.com
 Consignee (Ship to)

DCDC Health Services Pvt Ltd.

TALUKA HOSPITAL ALMEL, DIST VIJAYPURA
 Karnataka - 586202, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Karnataka, Code : 29
 Buyer (Bill to)

DCDC Health Services Pvt Ltd.

C-185, 1st Floor, Mayapuri Industrial, Area, Phase
 -2, New Delhi.
 Delhi - 110064, India
 GSTIN/UIN : 07AAFCD0204K1Z1
 State Name : Delhi, Code : 07
 Place of Supply : Delhi

Invoice No. **AF/277/24-25**
 Delivery Note
 Reference No. & Date
 Buyer's Order No. **215-062024-26365**
 Dispatch Doc No.
 Dispatched through
 Bill of Lading/LR-RR No.
 Terms of Delivery
 Dated **15-Jul-24**
 Mode/Terms of Payment
 Other References
 Dated **4-Jun-24**
 Delivery Note Date
 Destination
KARNATAKA
 Motor Vehicle No.
DL03CCI10214

| SI No. | Description of Goods | HSN/SAC | Quantity | Rate | per | Amount |
|------------------|---|---------|--------------|--------|-----|-------------------|
| 1 | SKY BLUE SCRUB SUIT SMALL BLUE UNIFORM SMALL | 620429 | 2 Set | 400.00 | Set | 800.00 |
| 2 | SKY BLUE SCRUB SUIT MEDIUM BLUE UNIFORM MEDIUM | 620429 | 2 Set | 400.00 | Set | 800.00 |
| | | | | | | 1,600.00 |
| SGST 2.5% | | | | | | 40.00 |
| CGST 2.5% | | | | | | 40.00 |
| Total | | | 4 Set | | | ₹ 1,680.00 |

Amount Chargeable (in words)

INR One Thousand Six Hundred Eighty Only

E. & O.E

| Taxable Value | Central Tax Rate | Central Tax Amount | State Tax Rate | State Tax Amount | Total Tax Amount |
|---------------|------------------|--------------------|----------------|------------------|------------------|
| 1,600.00 | 2.50% | 40.00 | 2.50% | 40.00 | 80.00 |
| Total: | | 40.00 | | 40.00 | 80.00 |

Tax Amount (in words) : **INR Eighty Only**

Remarks:

BILL NO : 277

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 : **ANCHOR FAB**
 Bank Name : **HDFC BANK LTD**
 A/c No. : **03372020000609**
 Branch & IFS Code : **MAA ANANDMAYI MARG OKHALA INDL PH.2 A HDFC0000337**

Customer's Seal and Signature

Stock/No. of Boxes Received
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time
 Signature
 7328451190

Prepared by KIDNEY CARE Verified by

This is a Computer Generated Invoice

