

## TAX INVOICE



Door No:59, 5th Street, 2nd Cross, East Vaithlanathapuram, Madurai-625018

Contact No : +91 7010174464. E Mail : kamhealthcare2017@gmail.com

DL No :- MDU/4855/20B, MDU/4608/21B Dt. 11.12.2017

GSTIN : 33DGGPP7911E1ZG

BUYER

Invoice No

INV / 038/ 2022- 23

The Deputy Director of Health Services

Date

01.02.2023

Ramanathapuram HUD

Ramanathapuram District

Order Ref No

6223/A3/2022, Dt: 09/01/2023

S No	Product	HSN / SAC	Qty	Unit Rate	Value	GST %	Total Amount before GST
1	ECG Machine 12 channel	9018	11	89285.72	982142.92	12%	982142.92
2	OT Table	9402	2	42372.89	84745.78	18%	84745.78
3	Centrifuge Machine	8421	11	8474.58	93220.38	18%	93220.38
4	Blood Bank Refrigerator	8413	3	161016.95	483050.85	18%	483050.85
					Gross Amount		1643159.93
					GST 12%		117857.15
					GST 18%		118983.06
					Round off		-0.14
							1880000.00

Amount Chargeable (In Words)

Rupees Eighteen Lakhs Eighty Thousand only

Net Amount

1880000.00

Account Name: KAM HEALTHCARE,  
Branch: BYPASS ROAD Branch - MADURAI,

Account No.: 50200040655547

Bank:HDFC

IFSC CODE: HDFC0002409

For KAM Healthcare

P. P. [Signature]  
Authorized Signatory