



MANSAROVAR DENTAL COLLEGE

Mansarovar Campus, Rani Avanti Bai Marg, Village- Hinotia Aalam,
Ward No. 84, Kolar Road, Bhopal (M.P) 462042

Tel: +91-9111777225, 761158888. Website: www.mansarovardentalcollege.com

4.1.1 Any other relevant information – Bills of equipments

Tax Invoice

(ORIGINAL FOP/RECIPIENT)

Boston Ivy Healthcare Solutions Pvt Ltd
 House No. 7/1, 1st Floor,
 Ushadani, Near Jagdai,
 College, Indore - 452 001
 Tel: 9136052480
 E-Mail: bostonivy@medikabazaar.com
 GST No.: 23AAFCB5524J12J
 GSTIN/UIN: 23AAFCB5524J12J
 State Name: Madhya Pradesh, Code: 23
 CIN: U51307MH2013PTC046092
 E-Mail: bostonivy@medikabazaar.com

Consignee
Mansarovar Dental College
 Kolar Road, Rani Laxmibai Marg, Opp Dmart
 Kolar, Bhopal, Bhopal, M.P. - 462042, Mobile Number - 9644222444
 State Name : Madhya Pradesh, Code : 23

Buyer (if other than consignee)
Mansarovar Dental College
 Kolar Road, Rani Laxmibai Marg,
 Opp Dmart Kolar, Bhopal, Bhopal
 . M.P. - 462042, Mobile Number - 9644222444
 State Name : Madhya Pradesh, Code : 23
 Place of Supply : Madhya Pradesh
 Contact person : Mansarovar Dental College
 Contact : 9644222444, 9644222444
 E-Mail : mdcobhopal2014@gmail.com

Invoice No. MP/20-21/00397	Dated 25-Oct-2020
Delivery Note	Mode/Terms of Payment
Supplier's Ref. MP/20-21/00397	On Delivery
Buyer's Order No.	Other Reference(s) GM1947912866 Dated 21-Oct-2020
Despatch Document No.	Delivery Note Date
Despatched through	Destination
Terms of Delivery	

SI	Description of Goods	HSN/SAC	GST Rate	MRP/Marginal	Quantity	Rate	per	Disc. %	Amount
1	FAST PACK PLUS FAST FILL ULTRA X	9018	12 %		1 Nos	67,857.14	Nos		67,857.14
	Output CGST								4,071.43
	Output SGST								4,071.43
	Total				1 Nos				Rs. 76,000.00

LF. NO
III-57,
58,
59

Amount Chargeable (in words) **INR Seventy Six Thousand Only** E. & O.E

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
9018	67,857.14	6%	4,071.43	6%	4,071.43	8,142.86
Total	67,857.14		4,071.43		4,071.43	8,142.86

Tax Amount (in words) : **INR Eight Thousand One Hundred Forty Two and Eighty Six paise Only**

Company's PAN : **AAFCB5524J**

Declaration
 We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Terms & Conditions

- 1) If due amount is not paid as per agreed payment terms interest will be charged at 18% p.a for delayed payment.
- 2) Goods once sold will not be taken back
- 3) "We are a MSME registered company with Reg. No. MH18D0004716."
- 4) The product are sold AS IS by Boston, the original Manufacturer / Supplier shall be responsible for any warranty or liabilities.

Company's Bank Details

Bank Name : **Axis Bank Limited**
 A/c No. : **915020036276902**
 Branch & IFS Code : **Worli Naka & UTIB0000653**

for Boston Ivy Healthcare Solutions Pvt Ltd

Customer's Seal and Signature

Prepared by _____ Verified by _____ Authorised Signatory _____

Mansarovar Dental College
 Kolar Road, BHOPAL

This is a Computer Generated Invoice

Store G.R. No.

Kirkee
28/10/20

Forwarded to CEO Sir
Bhopal 10/10/20

Tax Invoice

Bombay Dental & Surgical Pvt. Ltd.
 D-104/105, Sitladevi C H S Ltd, D N Nagar,
 Opp. Indian Oil Nagar, New Link Road,
 Andheri(W), Mumbai-400053
 CIN No: U51507MH2005PT C151183
 Licence No: IL/MD-000264 - RC/MD-000079
 Contact No: 09892977400 / 09320846766
 Maharashtra - 400053, India
 GSTIN/UIN: 27AACCB5677M1Z5
 State Name: Maharashtra, Code: 27
 E-Mail: thebds1@gmail.com

Invoice No.	2122 GST-2612	Dated	23-Aug-2021
Delivery Note		Mode/Terms of Payment	RC.
Supplier's Ref.	60936	Other Reference(s)	Mehul Sheth
Buyer's Order No.		Dated	
Despatch Document No.		Delivery Note Date	
Despatched through	Delhivery	Destination	Madhya Pradesh
Terms of Delivery			

Buyer
Mansarovar Dental College
 Ref. Dr. Gurudatt Nayak
 Kolar Road, Rani Lakshmi Bai Marg,
 Opp D Mart.
 Madhya Pradesh - 462042, India
 State Name : Madhya Pradesh, Code : 23

SI	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	MM-1500 Endo Sonic	90184900	1 Unit's	23,660.71	Unit's		23,660.71
2	Shapersonic 15 # 25	90184900	1 Unit's	892.86	Unit's		892.86
3	Shapersonic 20 # 25	90184900	1 Unit's	892.86	Unit's		892.86
IGST @ 12% (Output)							
Round Off							
							25,446.43
							3,053.57
Total			3 Unit's				₹ 28,500.00

Amount Chargeable (in words) E & O E
Rupee Twenty Eight Thousand Five Hundred Only

HSN/SAC	Taxable Value	Integrated Tax		Total Tax Amount
		Rate	Amount	
90184900	25,446.43	12%	3,053.57	3,053.57
Total	25,446.43		3,053.57	3,053.57

Tax Amount (in words) : **Rupee Three Thousand Fifty Three and Fifty Seven paise Only**

Remarks:
 S.N. 201502054
 Company's PAN : **AACCB5677M**

Company's Bank Details
 Bank Name : **ICICI Bank Ltd.**
 A/c No. : **036605000394**
 Branch & IFS Code : **Juhu & ICIC0000366**

Declaration
 We declare that this invoice shows the actual price of the goods and the particulars are true and correct.

for Bombay Dental & Surgical Pvt. Ltd.

 Authorized Signatory

SUBJECT TO MUMBAI JURISDICTION
 This is a Computer Generated Invoice

Tax Invoice

Serial System 20-21
 GSTIN/UIN : 23ACAPN4175F1ZW
 200/10712/1/2015

Consignee (Ship to)
AI GRAMOTHAN SAMITI
 Kolar Road Bhopal
 Madhya Pradesh, Code : 23

Supplier (Bill to)
AI GRAMOTHAN SAMITI
 Kolar Road Bhopal
 Madhya Pradesh, Code : 23

Invoice No 509/22362/21-22	Dated 4-Aug-21
Delivery Note	Mode/Terms of Payment
Reference No. & Date	Other References
Buyer's Order No.	Dated
Dispatch Doc No.	Delivery Note Date
Dispatched through	Destination
Terms of Delivery	

Description of Goods	HSN/SAC	GST Rate	Quantity	Rate (Incl. of Tax)	Rate per nos	Disc. %	Amount
-Ray Unit Single Arm Wall Gomex	90221300	18 %	1 nos	32,000.00	27,118.64		27,118.64
							CGST 2,440.68
							SGST 2,440.68

LF
III
52

Total 1 nos Rs. 32,000.00
E & CE

Amount Chargeable (in words)

Indian Rupees Thirty Two Thousand Only

HSN/SAC

90221300

Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
27,118.64	9%	2,440.68	9%	2,440.68	4,881.36
Total		2,440.68		2,440.68	4,881.36

Tax Amount (in words) : Indian Rupees Four Thousand Eight Hundred Eighty One and Thirty Six paise Only

Company's GSTIN/UIN : 23ACAPN4175F1ZW
 Company's PAN : ACAPN4175F

Declaration
 We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

[Signature]
 for Shail Dental System 20-21
 Authorised Signatory

Mansarovar Dental College
 Kolar Road, BHOPAL
 Store G.R. NO. *[Signature]*
 6/8/2021

This is a Computer Generated Invoice

Tax Invoice

Dent RevereDent
 6&7 M Plaza, Near Capital
 Petrol Pump, Raisen Road
 Bhopal
 GSTIN/UIN: 23AICPL3025G1ZU
 State Name : Madhya Pradesh, Code : 23
 Contact : +91 8827442744
 E-Mail : reveredent@gmail.com

Invoice No. **RD/0892/2019-20** Dated **18-Feb-2020**
 Mode/Terms of Payment
 Supplier's Ref. **2100** Other Reference(s)

Buyer
Mansarovar Dental College
 Kolar Road, Bhopal
 State Name : Madhya Pradesh, Code : 23

Terms of Delivery
By Hand

Sl No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Amount
1	ICPA Xicaine Vial	3004	12 %	20 Nos	22.32	Nos	446.40
2	Lidayn Spray	3004	12 %	3 Nos	178.57	Nos	535.71
3	Unolok Syringe 3ml Box		12 %	4 Nos	223.21	Nos	892.84
4	Woodpecker DTE D3 Scaler	90184900	12 %	2 Nos	7,678.57	Nos	15,357.14
5	Woodpecker DTE D5 LED DTE D3 Model	90184900	12 %	1 Nos	8,482.14	Nos	8,482.14
							25,714.23
CGST							1,542.85
SGST							1,542.85
Round Off							0.07
Total				30 Nos			₹ 28,800.00

LF No
 I-115
 I-176
 I-165
 II-70
 III-70

Amount Chargeable (in words) **INR Twenty Eight Thousand Eight Hundred Only** E. & O.E

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
3004	982.11	6%	58.92	6%	58.92	117.84
	892.84	6%	53.57	6%	53.57	107.14
90184900	23,839.28	6%	1,430.36	6%	1,430.36	2,860.72
Total	25,714.23		1,542.85		1,542.85	3,085.70

Tax Amount (in words) : **INR Three Thousand Eighty Five and Seventy paise Only**

Forwarded to CES Sir
 Bhu
 7/10/2020

Company's Bank Details
 Bank Name : ICICI Bank
 A/c No. : 327505500031
 Branch & IFS Code : Ashoka Garden & ICIC0003278

Declaration
 We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.



Duplicate bills
 Jayant
 8/10/20

Tax Invoice

(ORIGINAL FOR RECIPIENT)

Boston Ivy Healthcare Solutions Pvt Ltd
 House No. 771, 1st Floor,
 Lakhpati, Near Jagdham,
 College, Indore - 462 001
 Tel: 0130353440
 E-Mail: accounts@medikabazaar.com
 GST No. 23AAFC08524112LJ
 GSTIN/UIN: 23AAFC08524112LJ
 State Name : Madhya Pradesh, Code : 23
 CIN: U51307MH2013FTC240002
 E-Mail: accounts@medikabazaar.com

Invoice No. MP/20-21/00397	Dated 26-Oct-2020
Delivery Note	Mode/Terms of Payment On Delivery
Supplier's Ref. MP/20-21/00397	Other Reference(s) GM104701286 Dated 21-Oct-2020
Buyer's Order No.	Dated
Despatch Document No.	Delivery Note Date
Despatched through	Destination
Terms of Delivery	

Consignee
Mansarovar Dental College
 Kolar Road, Rani Laxmibai Marg, Opp Dmart
 Kolar, Bhopal, Bhopal, M.P. - 462042, Mobile Number - 9644222444
 State Name : Madhya Pradesh, Code : 23

Buyer (if other than consignee)
Mansarovar Dental College
 Kolar Road, Rani Laxmibai Marg,
 Opp Dmart Kolar, Bhopal, Bhopal
 , M.P. - 462042, Mobile Number - 9644222444
 State Name : Madhya Pradesh, Code : 23
 Place of Supply : Madhya Pradesh
 Contact person : Mansarovar Dental College
 Contact : 9644222444, 9644222444
 E-Mail : mdcbhopal2014@gmail.com

SI	Description of Goods	HSN/SAC	GST Rate	MRP/Marginal	Quantity	Rate	per	Disc. %	Amount
1	FAST PACK PLUS FAST FILL ULTRA X <i>Output CGST</i> <i>Output SGST</i>	9018	12 %		1 Nos	67,857.14	Nos		67,857.14
									4,071.43
									4,071.43
	Total				1 Nos				Rs. 76,000.00

LF NO
III-57,
58,
59

Amount Chargeable (in words)

INR Seventy Six Thousand Only

Rs. 76,000.00

E. & O.E

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
9018	67,857.14	6%	4,071.43	6%	4,071.43	8,142.86
Total	67,857.14		4,071.43		4,071.43	8,142.86

Tax Amount (in words) : **INR Eight Thousand One Hundred Forty Two and Eighty Six paise Only**

Company's PAN : **AAFCB5524J**

Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Terms & Conditions

1) If due amount is not paid as per agreed payment terms interest will be charged at 18% p.a. for delayed payment.

2) Goods once sold will not be taken back

3) "We are a MSME registered company with Reg. No. MH18D0004716."

4) The product are sold AS IS by Boston, the original Manufacturer / Supplier shall be responsible for any warranty or liabilities.

Company's Bank Details

Bank Name : **Axis Bank Limited**

A/c No. : **915020036276902**

Branch & IFS Code : **Worli Naka & UTIB0000653**

Customer's Seal and Signature

for Boston Ivy Healthcare Solutions Pvt Ltd

Mansarovar Dental College
 Kolar Road, BHOPAL

Prepared by _____ Verified by _____ Authorised Signatory _____

This is a Computer Generated Invoice

Tax Invoice

M/s Shail Industries
 A-37 AKVN INDUSTRIAL AREA
 BAGRODA BHOPAL
 BHOPAL
 GSTIN/UIN: 23AIFPN4852Q2ZQ
 State Name : Madhya Pradesh, Code : 23
 E-Mail : shailindental@yahoo.co.in

Consignee
Sri Sai Gramothan Samiti
 Kolar Road Bhopal

Invoice No.	Dated
120	22-Oct-2020
Delivery Note	Mode/Terms of Payment
Supplier's Ref.	Other Reference(s)
Buyer's Order No.	Dated
Despatch Document No.	Delivery Note Date
Despatched through	Destination
Terms of Delivery	

Buyer (if other than consignee)
Sri Sai Gramothan Samiti
 Kolar Road Bhopal
 Place of Supply : Madhya Pradesh

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc %	Amount	
1	Surgical Stool	9018	120 nos	446.43	nos		53,571.60	
							3,214.30	
							3,214.30	
							(-0.20)	
Total							120 nos	₹ 60,000.00

LF. NO
III-99

Sgst
Cgst
Round Off

Amount Chargeable (in words) : **₹ 60,000.00**
 E & O E

INR Sixty Thousand Only

	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
	53,571.60	6%	3,214.30	6%	3,214.30	6,428.60
Total:	53,571.60		3,214.30		3,214.30	6,428.60

Tax Amount (in words) : **INR Six Thousand Four Hundred Twenty Eight and Sixty paise Only**


Forwarded - to CED Sir
Blaw
27/10/20
27/10/20

Company's PAN : **AIFPN4852Q**

Declaration
 We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.
Kolar Road, BHOPAL

Company's Bank Details
 Bank Name : **Icici Bank (Current A/c)**
 A/c No. : **005505011713**
 Branch & IFS Code : **IGIC0000055**

Customer's Seal and Signature
 Store G.R. No. *23/10/20*

for M/s Shail Industries

 Authorised Signatory

6&7 M Plaza, Near Capital
Petrol Pump, Raisen Road
Bhopal
GSTIN/UIN: 23AICPL3025G1ZU
State Name : Madhya Pradesh, Code : 23
Contact : +91 8827442744
E-Mail : reveredent@gmail.com

Invoice No.
RD/0892/2019-20
Dated
18-Feb-2020
Mode/Terms of Payment
Supplier's Ref.
2100
Other Reference(s)

Buyer
Mansarovar Dental College
Kolar Road, Bhopal
State Name : Madhya Pradesh, Code : 23

Terms of Delivery
By Hand

Sl No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Amount
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CGST							1,542.85
SGST							1,542.85
Round Off							0.07
Total				30 Nos			₹ 28,800.00

LF No
I-115
I-176
I-165
II-70
III-70

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HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
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Total	25,714.23		1,542.85		1,542.85	3,085.70

Tax Amount (in words) : **INR Three Thousand Eighty Five and Seventy paise Only**

Forwarded to CES sir

Bhar
9/10/2020

Company's Bank Details
Bank Name : ICICI Bank
A/c No. : 327505500031
Branch & IFS Code: Ashoka Garden & ICIC0003278

Declaration
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

(Signature)



SUBJECT TO BHOPAL JURISDICTION
This is a Computer Generated Invoice

Duplicate bills
Mayan
8/10/20