



Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd)

F-701A, Lado Sarai, Mehrauli, New Delhi - 110030

Email: wellness@mediwheel.in, Website: www.mediwheel.in

Tel: +91-11-41195959, Fax: +91-11-29523020

CIN: U24240DL2011PTC216307

Tax Invoice

To BANK OF BARODA 4th FLOOR, SURAT PLAZA-I, SAYAJIGUNJ, BARODA GUJARAT - GSTN. 24AAACB1534F2ZB HO;HRM;STR-HR113/249			PAN : AAJCA5811D CIN : U24240DL2011PLC216307 GSTN : 07AAJCA5811D2ZZ Invoice No. :AHL/2023-24/0096 Invoice Date : 15th September 2023		
Sl. No.	Description	HSN/SAC	Quantity	Rate	Amount (in Rs.)
1	REIMBURSEMENT OF ANNUAL HEALTH CHECKUP FOR METRO CITY OFFICER	999319	1	3493.8	3,493.80
2	REIMBURSEMENT OF ANNUAL HEALTH CHECKUP FOR NON METRO CITY OFFICER	999319	2	3143.8	6,287.60
Total Invoice Amount			3		9,781.00
Rupees Nineteen Lakh Eighty Seven Thousand Seven Hundred Ninety Two Only.					

E. & O.E.

Remittance Details: - Arcofemi Healthcare Limited - Account No. : 510101006125297 - Bank : Union Bank of India - Branch : Greater Kailash, Part-II, New Delhi-110048 - IFSC Code : UBIN0902861	For Arcofemi Healthcare Pvt.Ltd. Authorised Signatory
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Tax Invoice

To BANK OF BARODA 4th FLOOR, SURAT PLAZA-I, SAYAJIGUNJ, BARODA GUJARAT - GSTN. 24AAACB1534F2ZB HO;HRM;STR-HR113/249			PAN : AAJCA5811D CIN : U24240DL2011PLC216307 GSTN : 07AAJCA5811D2ZZ Invoice No. :AHL/2023-24/0097 Invoice Date : 15th September 2023		
Sl. No.	Description	HSN/SAC	Quantity	Rate	Amount (in Rs.)

UNION BANK OF INDIA
RO - GHAZIABAD
PINNACLE TOWER, GARH ROAD, MEERUT
UTTAR PRADESH - 250002
GSTN. 09AAACU0564G8Z8



Arcofemi Healthcare Pvt Ltd
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F-701A, Lado Sarai, Mehrauli, New Delhi - 110030

PAN : AAJCA5811D
CIN : U24240DL2011PLC216307
GSTN : U24240DL2011PTC216307
Invoice No. : AHL/2023-24/0100
Invoice Date : 16th September 2023

Sl. No.	Description	HSN/SAC	Quantity	Rate	Amount (in Rs.)				
1	REIMBURSEMENT OF ANNUAL HEALTH CHECKUP FINANCIAL YEAR 2023-24								
	<table border="1"><thead><tr><th>P.F.NO</th><th>NAME OF CANDIDATE</th></tr></thead><tbody><tr><td>558906</td><td>KAPIL BHATIA</td></tr></tbody></table>	P.F.NO	NAME OF CANDIDATE	558906	KAPIL BHATIA	999319	1	200	200
P.F.NO	NAME OF CANDIDATE								
558906	KAPIL BHATIA								
Total Invoice Amount			1		200.00				

Rupees Four Thousand Only.

E.& O.E.

Remittance Details:

- Arcofemi Healthcare Limited
- Account No. : **510101006125297**
- Bank : Union Bank of India
- Branch : Greater Kailash, Part-II, New Delhi-110048
- IFSC Code : **UBIN0902861**

For Arcofemi Healthcare Pvt.Ltd.

Authorised Signatory