

Tax Invoice

80. CBCT

Radion Equipments Pvt Ltd
#23, 2nd Stage, Kaverinagar,
Near Shiva Temple, Pipeline Road
Kurubarahalli - 560070
Tel - 080-23221400 / 401
GSTIN/UIN: 29AAICR0267P1ZP
State Name: Maharashtra, Code: 27
E-Mail: info@radions.in

Consignee

GSL Educational Society

Rajahmundry

Andhra Pradesh

GSTIN/UIN : 37AADFG7866P1ZJ

State Name : Andhra Pradesh, Code : 37

Invoice No. **R-002** e-Way Bill No. **111035812864** Dated **2-May-2018**
Delivery Note Mode/Terms of Payment

Supplier's Ref. Other Reference(s)

R-002 Buyer's Order No. Dated

Despatch Document No. Delivery Note Date

Despatched through Destination

Terms of Delivery

Buyer (if other than consignee)

GSL Educational Society

Rajahmundry

Andhra Pradesh

GSTIN/UIN : 37AADFG7866P1ZJ

State Name : Andhra Pradesh, Code : 37

Sl No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	Dentri 2S CBCT Unit	90221300	12 %	1 Nos	41,07,143.00	Nos		41,07,143.00
	Less: IGST @ 12% Output Round Off					12 %		4,92,857.16
								(-4,92,857.16)
	Total			1 Nos				₹ 46,00,000.00

Amount Chargeable (in words)

INR Forty Six Lakh Only

E & O E

HSN/SAC	Taxable Value	Integrated Tax Rate	Integrated Tax Amount	Total Tax Amount
90221300	41,07,143.00	12%	4,92,857.16	4,92,857.16
Total	41,07,143.00		4,92,857.16	4,92,857.16

Tax Amount (in words) : **INR Four Lakh Ninety Two Thousand Eight Hundred Fifty Seven and Sixteen paise Only**

Company's PAN : **AAICR0267P**

Declaration

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

for Radion Equipments Pvt Ltd

Authorised Signatory

This is a Computer Generated Invoice

PROFORMA INVOICE

HYDRO TECH NO.15/2, 2ND STREET, CHOWDRY NAGAR, VALASARAWAKKAM, CHENNAI - 600 087. 9445077281 / 9445386506 GSTIN/UIN: 33AAFFH7964P1ZP State Name : Tamil Nadu, Code : 33 E-Mail : hydrotech3dchennai@gmail.com		Invoice No. PI-22-23-1090	Dated 15-Feb-2023
Buyer GSL Dental College Old Students Association GSL DENTAL COLLEGE, RAJANAGARAM, RAJAHMUNDRY, PINCODE:-533296 State Name : Andhra Pradesh, Code : 37 Place of Supply : Andhra Pradesh Contact : +91 99488 16957		Delivery Note	Mode/Terms of Payment 100% AGAINST PI
		Supplier's Ref.	Other Reference(s)
		Buyer's Order No. VERBAL	Dated 15-Feb-2023
		Despatch Document No.	Delivery Note Date
		Despatched through COUREIR	Destination
		Terms of Delivery FREE DOOR DELIVERY	

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	PHROZEN 3D PRINTER SONIC MIGHTY 4K	84775900	2 NOS	44,067.80	NOS		88,135.60
2	3D PRINTER SONIC MINI 4K	84775900	1 NOS	25,423.73	NOS		25,423.73
3	ANYCUBIC UV-RESIN GRAY 1KG	39073090	6 NOS	1,525.42	NOS		9,152.52
4	ANYCUBIC CLEANING AND CUREING MACHINE - PLUS	85437099	1 NOS	16,101.69	NOS		16,101.69
							1,38,813.54
							24,986.43
							0.03
	IGST OUTPUT ROUNDING OFF						
	Total		10 NOS				Rs. 1,63,800.00

Amount Chargeable (in words)

Indian Rupees One Lakh Sixty Three Thousand Eight Hundred Only

E. & O. E.

	Taxable Value	Integrated Tax		Total Tax Amount
		Rate	Amount	
	1,38,813.54	18%	24,986.43	24,986.43
Total:	1,38,813.54		24,986.43	24,986.43

Tax Amount (in words) : **Indian Rupees Twenty Four Thousand Nine Hundred Eighty Six and Forty Three paise Only**

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

Bank Name : HDFC BANK LTD

A/c No. : 07952320000526

Branch & IFS Code : PERUNGUDI & HDFC0000795

Customer's Seal and Signature

for HYDRO TECH

Authorised Signatory

This is a Computer Generated Invoice

Raghu
16/1/23
V.M. Raghu Ram Ravipati
Reg. No.: A13649
Professor, Dept. of Orthodontics
Dental College & Hospital,
Chhara Pradesh-533 277.

by *L. By* Professor & Head
Dept. of Oral Medicine & Radiology
Dental College & Hospital
2002204

TAX INVOICE

DENTSPLY India Pvt. Ltd.
CIN-U74899DL1995PTC073183
Kh.No. 66/20 & 66/11/2 Gali No.2
Main Rothak Road
Mundka Industrial Area
Delhi
DELHI
IN-110041

I GSL EDUCATIONAL SOCIETY
N 6-265, GSL EDUCATIONAL
V SOCIETY, NH-16, LAKSHMIPURAM
O , RAJANAGARAM , EAST
I GODAVARI DISTRICT, ANDHRA
C PRADESH
E
T RAJAHMUNDY
C ANDHRA P. AP STATE CODE-28
India-533296

INVOICE NO. : DLSI2223014426
DATE : 30/Dec/2022

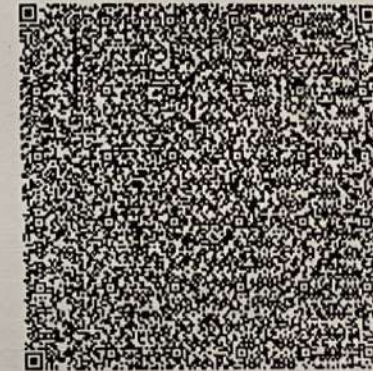
GST No. : 07AAACD3171E1Z3
ORDER NO. : SO-233725
Customer PO : GSLES/D/L/190/20
Picking list : PR-0909811,PR-
PAN # : AAACD3171E
Customer No. : 124049

Contact Phone:
Phone :

S GSL EDUCATIONAL SOCIETY
H 6-265, GSL EDUCATIONAL
I SOCIETY, NH-16, LAKSHMIPURAM
P , RAJANAGARAM , EAST
GODAVARI DISTRICT, ANDHRA
PRADESH

RAJAHMUNDY
T ANDHRA P. AP STATE CODE-28
O India-533296

Original for recipient ☐
Duplicate for Transporter ☐
Triplicate for Supplier ☐
Extra copy ☐



Tel :
GST No. : 37AADFG7866P1ZJ
PAN # : AADFG7866P
Place of Supply : AP STATE CODE-28
Remarks : Three Year warranty
Toll Free no-18002080910

GST No. : 37AADFG7866P1ZJ
Region : EQ-South02

Terms of Delivery	DT. SHIPPED	SHIPPED VIA	PAYMENT TERMS
	30/Dec/2022	AIR	30 Days

PRINCIPAL
G.S.L. DENTAL COLLEGE
Rajahmundry



Product No.	Description	Batch Expiry	UQC	HSN code	Qty	Unit price	Total	Discount	Taxable value	CGST Rate	Amount	SGST Rate	Amount	IGST Rate	Amount
6468560	InLab MC X5 WITH PC AND ALL	106481	PC	90184900	1.00	3,392,857.14	3,392,857.14	0.00	3,392,857.14	0.000	0.000	0.000	0.000	12.000	407,142.857
6676386	POWER PACK, SPARE PART	21772155	PC	85075000	1.00	0.00	0.00	0.00	0.00	0.000	0.000	0.000	0.000	18.000	0.000

BOOK
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TAX INVOICE

DENTSPLY India Pvt. Ltd.
CIN-U74899DL1995PTC073183
Kh.No. 66/20 & 66/11/2 Gali No.2
Main Rothak Road
Mundka Industrial Area
Delhi
DELHI
IN-110041

I GSL EDUCATIONAL SOCIETY
N 6-265, GSL EDUCATIONAL
V SOCIETY, NH-16, LAKSHMIPURAM
O , RAJANAGARAM, EAST
I GODAVARI DISTRICT, ANDHRA
C PRADESH
E
T RAJAHMUNDY
O ANDHRA P. AP STATE CODE-28
India-533296

INVOICE NO. : DLSI2223014426
DATE : 30/Dec/2022

GST No. : 07AAACD3171E1Z3
ORDER NO. : SO-233725
Customer PO : GSLES/D/L/190/20
Picking list : PR-0909811,PR-
PAN # : AAACD3171E
Customer No. : 124049

Contact Phone:
Phone :

S GSL EDUCATIONAL SOCIETY
H 6-265, GSL EDUCATIONAL
I SOCIETY, NH-16, LAKSHMIPURAM
P , RAJANAGARAM, EAST
GODAVARI DISTRICT, ANDHRA
PRADESH

RAJAHMUNDY
ANDHRA P. AP STATE CODE-28
India-533296

Original for recipient ☐
Duplicate for Transporter ☐
Triplicate for Supplier ☐
Extra copy ☐

Product No.	Description	Batch Expiry	UQC	HSN code	Qty	Unit price	Total	Discount	Taxable value	CGST Rate	Amount	SGST Rate	Amount	IGST Rate	Amount
6690338	INLAB PROFIRE	3538	PC	85143010	1.00	1,016,949.15	1,016,949.15	0.00	1,016,949.15	0.000	0.000	0.000	0.000	18.000	183,050.847
6692672	PRIMESCAN AC	113708	PC	90184900	1.00	2,512,801.20	2,512,801.20	0.00	2,512,801.20	0.000	0.000	0.000	0.000	12.000	301,536.144
6721703	LICENSE STICK GEN2, PACKAGED	08-010122	PC	85235220	1.00	0.00	0.00	0.00	0.00	0.000	0.000	0.000	0.000	18.000	0.000
Total					5.00		6,922,607.49	0.00	6,922,607.49		0.000		0.000		891,729.848

NET AMOUNT

7,814,337.00

BALANCE AMOUNT

7,814,337.00

Seventy Eight lacs Fourteen Thousand Three Hundred Thirty Seven Only

Dental Day Book - 1
Pages - 98



Signature

PRINCIPAL
G.S.L. DENTAL COLLEGE
Rajahmundry

GRNBR-14816



Authorized Distributor of



RNT MED SIMULATION



RNT MED SIMULATION

INVOICE

Invoice Number RNTMS/001/2023-24

Invoice Date 01-Aug-23

Bill To :

The Finance Director

GSL Educational Society

D. No. 6-265, N.H. 16, Lakshmipuram,

Rajanagaram, Rajamahendravaram 533 296, AP

GST Number: 37AADFG7866P1ZJ

Bill To :

The Principal

GSL Dental College

D. No. 6-265, N.H. 16, Lakshmipuram,

Rajanagaram, Rajamahendravaram 533 296, AP

In case of any clarification, please contact Tapa Bhattacharyya/ Raajkant Shetty @ +91 98457 44098 / +91 99001 80554

Sl. No.	Part No.	Description	Unit Price	Quantity	Total Price
1	Simex	SimEx with Camera, Courses, Software, Tooth Model for tooth preparation, Handpiece, Bur Set, Calibration tools		2 sets	
2	Combo	Zin1 unit with SimEx and IRIS Implant Realtime Imaging System including SW & cart with camera and camera holder with Monitor (Specs attached) and monitor holder for IRIS; IRIS , training tooth models for implantology & tooth preparation, Hand pieces for SimEx, Sleeve for Handpiece, preparation, Handpiece for SimEx, Sleeve for handpiece for IRIS (handpiece not included for IRIS), Registration set, Bur set for SimEx, Calibration tools for both, including Courses for SimEx		1 Set	
3	Nasco	Dental X-RAY Manikin with full tooth set		To be Supplied Free of Cost	
4	Nasco	Adult Dental Local Anesthesia Manikin with tooth set		To be Supplied Free of Cost	
5	Nasco	Pedo Dental Local Anesthesia Manikin with tooth set		To be Supplied Free of Cost	
Please Note:		We would request College Authorities to Provide the Workstations, Dental Chairs and Hand Pieces for IRIS from Implant/ Physio Dispenser for final Installations.			
Your PO number GSLES/DENTAL/SIMEX/70/2022-23 dated 10th August 2023					

Total Amount in words: Rupees One Crore Thirty One Lakhs Sixty Nine Thousand Six Hundred and Forty Three Only

Sub Total CIF GSL Stores

₹ 1,11,60,714

IGST @ 18 %

₹ 20,08,929

Grant Total

₹ 1,31,69,643

Terms & Condition :

- Prices are inclusive of Freight, Insurance and Customs Duty.
- Warranty for 2 year from the date of installation against manufacturing defects and parts failure. However, consumables and physical damages are not covered under warranty. Any part required during warranty will be procured by RNT Med Simulation from EPED at their own cost and get the system repaired on site or at their Service Facility in Bangalore.
- Delivery : Free delivery at site.
- Payment Terms - 40% advance along with the PO. Next 40% against Proof of Despatch & balance 20% against successful installation.
- All cheque/ Demand Draft/ NEFT transfer should be made in favour of "RNT MED SIMULATION" (payable at Bangalore)
- Bank Name: HDFC Bank ; Branch Name: IT Park (0077)
- Account no: 50200070147417
- IFSC: HDFC0000077
- GST No 29ABFFR1480F124
- We will be providing training at our Principal's Facilities in Taiwan along with travel and accomodation for 2 Faculties

 Authorised Signatory
 RNT MED SIMULATION

 Registered Address : #203 Srikar Alpine Apartment, 17 Hanumannagar Cross, New Thippasandra, Bangalore-560075, Karnataka
 Telephone: +91 98457 44098/ 99001 80554 email: tapa@rntmedsimulation.com

Tax Invoice

Cube Dental Equipments No.16, Ground Floor, 4th Street, Jai Nagar, Valasarawakkam, Chennai GST-No.33CTOPS5572A1Z1 GSTIN/UIN: 33CTOPS5572A1ZI State Name : Tamil Nadu, Code : 33 E-Mail : cubedentalequipments@gmail.com		Invoice No. CDE/18-19/182	Dated 5-Jul-2018
		Delivery Note	Mode/Terms of Payment
		Supplier's Ref. CDE/18-19/182	Other Reference(s)
Buyer GSL Educational Society The Principal D.No.6-265, N.H-16, Lakshmipuram, Rajanagaram, Rahamahendravaram-533 296. Andhra Pradesh GSTIN/UIN : 37AADFG7866P1ZJ State Name : Andhra Pradesh, Code : 37		Buyer's Order No. GSLES/DENTAL/04/2018	Dated 21-Jun-2018
		Despatch Document No.	Delivery Note Date
		Despatched through	Destination
		Terms of Delivery	

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	Prima DNT Microscope Stand with Cold Light 5 STEP Magni Changer with Magnification 0.4*,0.6*,1.0*,1.6* and 2.5*	90184900	1 Nos	3,00,000.00	Nos	3,00,000.00
	Output IGST @ 12%				12 %	36,000.00
Total			1 Nos			₹ 3,36,000.00

E. & O.E

Amount Chargeable (in words) **INR Three Lakh Thirty Six Thousand Only**

HSN/SAC	Taxable Value	Integrated Tax		Total Tax Amount
		Rate	Amount	
90184900	3,00,000.00	12%	36,000.00	36,000.00
Total	3,00,000.00		36,000.00	36,000.00

Tax Amount (in words) : **INR Thirty Six Thousand Only**

Company's PAN : **CTOPS5572A**

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
 Bank Name : **ICICI Bank - 023205004650**
 A/c No. : **023205004650**
 Branch & IFS Code : **Alwarthirunagar & ICIC0000232**
 for Cube Dental Equipments

Authorized Signatory

This is a Computer Generated Invoice

TAX INVOICE

GSTIN: 37AAGCC3838F1ZN

Bill To

GSL Dental College & Hospital
NH-16, LAKSHMIPURAM, RAJANAGARAM, A

INVOICE No:

Dated

MISB/23-24/0614

30.11.23

S No:	Description of Goods	HSN Codes	GST Rate	Qty	Rate	Amount
1	400UM BARE FIBER	9018	12.00%	1	12583.00	12583
2	DENTAL HANDPIECE	9018	12.00%	1	7967.30	7967.3
					Total	20550.30
					ROUNDOFF	-0.34
					GST State Tax 2.5%	0.00
		5%	0.00		GST Central Tax 2.5%	0.00
		12%	20550.30		GST State Tax 6%	1233.02
		18%	0.00		GST Central Tax 6%	1233.02
		28%	0.00		GST State Tax 9%	0.00
			20550.30		GST Central Tax 9%	0.00
					GST State Tax 14%	0.00
					GST Central Tax 14%	0.00
					Transportation	0.00
					Total	23016.00

Amount Chargeable (in words)
(Rupees Twenty Three Thousand and Sixteen Only)

For Compass Enterprises Private Limited

Authorised Signatory



PERIOD: R.P. Ashke
20/12/23

Dept. of Periodontics

UNIVERSITY OF CALIFORNIA
DENTAL COLLEGE
Los Angeles

ENTERPRISES PRIVATE LIMITED
GSL Campus, NH-16, Lakshmipuram, Rajanagaram, Rajahmundry - 533296.
GSTIN: 37AAGCC3838F1ZN

Bill To

INVOICE No:

Dated

MISB/23-24/061

30.11.23

Amount Chargeable (in words)
(Rupees Twenty Three Thousand and Sixteen Only)

For Compass Enterprises Private Limited

Authorized Signatory



PERIOD: R.P. Adhe
20/12/23

20/1/19

Dept. of Periodontics

