PROFORMA INVOICE

	IXON		Invoice No.				Dated			
15	/7 Shan Building		7				5-Apr-23			
Mahalingapuram Vellalore, Coimbatore			Delivery Note				Mode/Terms of Payment			
GSTIN/UIN: 33BRYPS5593J1ZP										
	ate Name:Tamil Nadu, Code:33		Reference No. & Date.				Other References			
Contact: 7871203000										
Fax : Info@mosquitokillermachine.Com Consignee (Ship to)				Buyer's Order No.				Dated		
Cash Sales										
Cash Sales				Dispatch Doc No.				Delivery Note Date		
State Name : Tamil Nadu, Code : 33				·						
01	otate Name . Tamii Nada, oode . 55			Dispatched through			Destination			
					Ü					
			Terms	of I	Delivery					
Bu	yer (Bill to)									
Ca	ish Sales									
St	ate Name : Tamil Nadu, Code : 33									
	Decement on of Conde	LICNI/CA		· T	Our matitud	Data			A	
SI	Description of Goods	HSN/SA	C GS Ra		Quantity	Rate		per	Amount	
No.			Па	ıe						
1	Fly Killer Machine (Big)	8516	18	%	2 Nos	6,116	.00	Nos	12,232.00	
	SGST								1,100.88	
	CGST								1,100.88	
	Tota	I			2 Nos			ŧ	₹ 14,433.76	
An	nount Chargeable (in words)								E. & O.E	
IN	R Fourteen Thousand Four Hundred T	hirty Thre	e and	Se	ventv Six	oaise O	nlv			
HSN/SAC Taxable				Central Tax			State Tax Total			
		Value	Rate		Amount	Rate		mount	Tax Amount	
85		12,232.00	99	%	1,100.88	9%		1,100.8	38 2,201.76	
	Total	12,232.00	וכ		1,100.88		1	1,100.8	38 2,201.76	
Tax Amount (in words): INR Two Thousand Two Hundred One and Seventy Six paise Only										
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_		_								
Declaration We dealers that this invains above the actual price of the				for ANXON						
We declare that this invoice shows the actual price of the goods described and that all particulars are true and										
correct.								Διitk	norised Signatory	
CO										

SUBJECT TO COIMBATORE JURISDICTION

This is a Computer Generated Invoice