PROFORMA INVOICE

Saibex Network			Invoice No.				Dated			
	op No.188, Sunrays Shopping Mall	L	SN/24-25/1085				23-May-24			
Charkop Market Sector 5 Kandivali West Mumbai-400067			Buyer's Order No.				Dated			
GSTIN/UIN: 27ADOPR9985L1Z7										
State Name: Maharashtra, Code: 27										
	Mail : info@saibex.co.in yer (Bill to)									
	e Great Eastern Shipping Company									
	cean House, 134/ A									
	. Annie Besant Road									
	orli umbai-18									
	ST NO.27AAACT1565C1ZN									
	STIN/UIN : 27AAACT1565C1ZN ate Name : Maharashtra, Code : 27									
Si	ate Name : Maharashtra, Code : 27									
SI No.	Description of Services	HSN/SA	AC Qua	ntity	Rate	per	Disc. %		Amount	
		007004	_	.	2.500.6	0-4			45 500 00	
1	E-Signer Software Savita Krishnamoorthy	997331	5	Soft	3,500.0	Soft			17,500.00	
	Ms. Somesh Kapila.									
	Homiyar K. Byramji									
	Aloysius D`Mello									
	Divyesh S. Kapadia From 01-04-2024 to 31-03-2025									
	F10111 01-04-2024 to 31-03-2025									
	Output CGST								1,575.00	
	Output SGST								1,575.00	
	Total		5	Soft				₹ 2	0,650.00	
	ount Chargeable (in words)								E. & O.E	
Rupee Twenty Thousand Six Hundred Fifty Only										
		Taxable Value	Rate	ntral ·		Sta Rate	ite Tax Amoun	, t	Total Tax Amount	
		17,500.0			,575.00	9%	1,575.		3,150.00	
		17,500.0			,575.00		1,575		3,150.00	
Tax	Amount (in words): Rupee Three Thousand	One Hu	undred F	iftv (Only					
	•			•	•					
	Company's Bank Details									
A/c Holder's Name: Saibex Network										
			Bank Name : IDBI Bank							
Со	mpany's PAN : ADOPR9985L	A/c No. : 0619102000004077 Branch & IFS Code: Amboli, Andheri W. & IBKL0000619								
Declaration for Saibex Network										
	declare that this invoice shows the actual price									
	ods described and that all particulars are true ar rrect.	nd					۸.,	ıthori	sed Signatory	

Authorised Signatory