Tax Invoice

Chayagraphics Healthcare Private Ltd. Oliayagraphics nealthcare Private
Old No. 32, New No. 62, Ground Floor,
Veerabadran Street,
Nungambakkam, CHENNAI-600034
DL. 2798/MZI/20B, 2745/MZI/21B
Ph. 044 2825 4312 / 4313
OST:33AAFCC5818C1Z2
GSTIN/UIN: 33AAFCC5818C1Z2
State Name: Tamii Nadu, Code: 33
CIN: U33110KA2014PTC073511
E-Mail: venkat@chayagraphics.com Buyer

Aarthi Scans Pvt Ltd,

16, 100 Feet Road, Vadapalani, Chennai - 600 026. Tamil Nadu, Code: 33

State Name Place of Supply

Tamil Nadu

	Invoice No. e-Way Bill No.	Dated			
	OMNI/19-20/510 501154020019	14-Dec-2019			
	Delivery Note	Mode/Terms of Payment			
		Immediate			
	Supplier's Ref.	Other Reference(s)			
1	Buyer's Order No.	Dated			
	Telephonic	13-Dec-2019			
	Despatch Document No.	Delivery Note Date			
	Despatched through	Destination			

Local Delivery Terms of Delivery

Chennai

JIRN NO: 2301

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Si No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	Omnipaque 300mg \ 100ml Batch : 14712966 Expiry : 30-Jun-2022 Batch : 14715567 Expiry : 30-Jun-2022	30063000	70 Vials	700.00 2% Di	tount	5,32,000.00 10640.00 521,360
	Output CGST @ 2.5% Output CGST @ 2.5% Output SGST @ 2.5%			2.50 2.50	%	13,300.00 13,300.00
	omily 4-12 LTD.			_	-	

RTHI SCANS PVI. LI 110.60, 100Faet Road, Vadapalant, Chennai-28, Vadapalant, Chennai-28,

Total

760 Vials

5,47,960

₹5,58,600.00 E. & O.E

, mount Chargeable (in words) INR Five Lakh Fifty Eight Thousand Six Hundred Only

Total State Tax Central Tax Taxable Tax Amount Rate Amount Rate **Amount** Value 13,300.00 26,600.00 13,300.00 2.50% 5,32,000.00 2.50% 13,300.00 26,600.00 13,300.00 5,32,000.00 Total:

Tax Amount (in words): INR Twenty Six Thousand Six Hundred Only

: AAFCC5818C

Company's Bank Details Bank Name

A/c No.

Branch & IFS Code

: SBM CA - 64186222174 SHEA

for Chayagraphics Leathcare Pri

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

Company's PAN

SUBJECT TO CHENNAI JURISDICTION This is a Computer Generated Invoice

Please Pay this bill Payment within 10 days then only applicable discount for Ry. 10640):

