PROTEC HEALTH CARE

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RO odhilal Main Road
Ara, alayam,
Madurai-16
PH:9842169773,8870539566
Gst:33AARFP5436A1ZD
DL NO: MDU/4506/20B,4268/21B
Tamil Nadu

E-mail: protechealthcare1@gmail.com Buyer

Arthy Scans&Labs, 177, TVM Road, Thirunelveli Ph:9500083643

Tamil Nadu-627003

	Invoice No.	Dated
	AO2979	25-Nov-2019
	Delivery Note	Mode/Terms of Payment
	Supplier's Ref.	Other Reference(s)
	Buyer's Order No.	Dated
	Despatch Document No.	Dated
	Despatched through	Destination

Terms of Delivery

SI Description of Goods	Quantity	Rate	per	Amount
1 Exam Glove Medium	2,000 pcs	1.65	pcs	3,300.00
Cgs Sgs		6	%	198.00 198.00
RECEIVED CHECKED				M,
VERIFIED ACCOUNTED	3690		5	alul 39 1/18
Total	2,000 pcs			3,696.00

Amount Chargeable (in words)

Rs. Three Thousand Six Hundred Ninety Six Only

Declaration State bank of india a/c no:65243351947 ifsc:sbin0050868 branch: vasantha nagar

for PROTE

E. & O.E