

## Service Purchase Order

**Supplier:** DABN & Associates Chartered

**Contact Person:**

**Address:**

**Pan No:**

**Phone No:**

**Email:**

**PO Code:** 1600004

**PO Date:** 2020/06/15

**PO Miti:**

**Delivery Date:** 6/15/20

**Status:** Closed

**Currency Name:** Nepalese Rupee

**REF:**

S. No.	SAC/Description	G/L Account	ItemUOM	Quantity	Price	Amount
1	XYZ	Prepaid Insurance		0.00	1,000.00	1,000.00
<b>Total</b>						<b>1,000.00</b>

**Amount in Words:** RUPEES ONE THOUSAND ONE HUNDRED THIRTY ONLY

	%	Amount
<b>Sub Total</b>		1,000.00
<b>Taxable Amount</b>		1,000.00
<b>VAT 13%</b>	13.00	130.00
<b>Total</b>		1,130.00

**Remarks:** plkmnbvcs

**For:** UDN TRAINING

shubham

**Prepared by**

**Pre-Authenticate**

**(Director/Authorised Signatory)**