codetentacles

Tax Invoice

NO 354, T HROAD THIRUMAZHISAI - 600124

FR-Billing

GST No: 27CIQPP1847N1Z

То:	Invoice Period	01/10/2024 to 15/10/2024		
CashCounter	Invoice No	TESTDEMO/2023-24/002		
Office no. 704, City Avenue, Pune Banglore Highway Pashan Exit, near	Invoice Date	21/10/2024		
Sayaji Hotel, Shankar Kalat Nagar, Wakad, Pune, Pimpri-Chinchwad, Maharashtra 411057	Total	74.00 22.00 2.00		
	Fuel Surcharge 30%			
	Docket Charges			
	Royalty Charges	1.00		
	SGST @ 9%	9.00		
GST No : 27aeip584855	CGST @ 9%	9.00		
	Other charge	12.00		
	Grand Total	129.00		

Amount in words: One Hundred Twenty Nine Only.

Statutory Guidelines

1. PAN NO : CIQPP1847N 2. GST NO : 27CIQPP1847N1Z

3. SAC Code: 996812

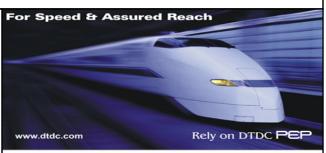
4 . Payment Should be made ONLY by crossed cheque or DD in favour 'codetentacles' after obtaining money receipt positively

5. Payment Due Date: 28/10/2024

6. Any delay in payment after due date will be charged 24% per annum on prorata basis

General Guidelines:

- 1. Kindly acknowledge the receipt of the bill by handing over the bill-acknowledgement, duly filled up, to our representative who delivers.
- 2. While making the payment please handover the payment advise with full details.
- 3. Any mistake/correction found in the invoice has to be reported in writing within Seven days from the receipt of the invoice.
- 4. This is a computer-generated invoice and hence does not require signature.
- 5. For any queries please contact Regional Commercial department.
- 6. Fuel Surcharge* is calculated only on T/s Amount





Bank Details:

Account name: NGR ENTERPRISES

Bank :Canara Bank A/C No : 120002906042 IFSC Code : CNRB0003752 Bank Address: THIRUMAZHISAI

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Payment Advice (Please detach and return with your payment)								
Invoice No : TE	STDEMO/2023-24/002 21/10/2024	2 Invoice Date :	Invoice No: TESTDEMO/2023-24/002 Invoice Date: 21/10/2024					
			CashCounter					
Name Of the Bank	Cheque / DD Number	Cheque / DD date	Invoice Amount(Rs.)	TDS(Rs.)	Cheque / DD date			
			129.00					
Amount in words : One H	lundred Twenty Nine Only.				•			

Name: Signature: Date:

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BILL ACKNOWLEDGEMENT

Client Name: CashCounter

Name of the Receiver

Received Date

日本記書

Sign & Seal



Sr No.	Booking date	C-Note No.	Receiver	Destination	Mode	Wt	Qty	Туре	Amount	Risk / FOV surcharge	Other Charge s	Total
1	08/10/2024	D90909090	dfgsrty v dthg tdy6	Pune	AC1	0.900	2	N	60.00	2.00	12	74.00
	Total										7	4.00