

Tax Invoice

Hinduja pharma

vasai phata waliv

Dist.-

Mob. No 41516549845 None

GSTIN/UIN: 42228ygwhdvhwd

State Name:

Contact: 41516549845

E-Mail: jj@gmail.com

Invoice No.

24/2025-26

Dated

2025-06-21

Delivery Note**Mode/Terms of Payment****Reference No. & Date.****Other References****Buyer's Order No.****Dated**

GSTIN/UIN:

State Name:

Dispatch Doc No.**Delivery Note Date****Dispatched through****Destination****Terms of Delivery**

Sr	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	Per	Amount
							0.00
	CGST						0.00
	SGST						0.00
	Round Off						0.00
							0.00

Amount Chargeable (in words)

None

E. & O.E

Declaration

1. Goods once sold will not be taken back.
2. Interest @18%p.a will be charged if the payment is not made within the stipulated time.
3. Subject to Mumbai jurisdiction only.
4. Certified that above particulars are true & correct.

Company's Bank Details**Bank Name:****A/c No.:****Branch & IFS Code:****Customer's Seal and Signature**

for Hinduja pharma

Authorized Signatory

This is a Computer Generated Invoice