

# TAX INVOICE

ORIGINAL for RECIPIENT

No:- 0021072611 | Issue Date 26.07.2022

## Alliance Broadband Services Pvt. Ltd.

City: Kolkata  
Address: P-31, Nani Gopal Roy Chowdhury Avenue, Kolkata - 700014  
PAN No: AAECA3151B  
GST No: 19AAECA3151B1Z7  
State: West Bengal code: 19  
CIN No: U72900WB2003PTC095621  
SAC No: 998422  
Phone: 033-71002000, Toll Free No: 1800 1200 300 www.alliancebroadband.co.in

## TO: ARKA PRAVA BANDYOPADHYAY

Address: P 57, RASHTRA GURU AVENUE, CHITALI APARTMENT, SOUTH DUM DUM, WEST BENGAL, KOLKATA- 700028 9433466259  
State: West Bengal code: 19

N	Description of goods or services	amount
1	fee "ENTRY" (02.08.2022 to 31.08.2022)	700.000
TOTAL AMOUNT		700.00
CGST (9%)		63.00
SGST (9%)		63.00
TOTAL		826.00
Rounded off		826.00

IN WORDS: INR Eight hundred and twenty six rupee

Payment method: ☐ Cheque ☐ D.D/P.O. ☐ Cash

Date of occurrence of chargeable event / payment: 26.07.2022 / 26.07.2022

### TERMS AND CONDITIONS

- 1) It will be deemed that you have accepted this Invoice in full in the event you have not lodged any written objection with us within 20 days of receipt of this Invoice.
- 2) To avoid disconnection of service you are requested to pay the full amount by the due date mentioned in the invoice. An interest of 18% per annum will be charged on the amount remaining unpaid after the due date.
- 3) All Cheques/Demand Drafts in payment of Invoice should be drawn in favour of "Alliance Broadband Services Pvt. Ltd."
- 4) Kindly mention invoice number along with your payment to ensure correct and timely processing.
- 5) Cheque Return Charges of Rs. 250 would be charged extra.
- 6) E-Invoice will be generated within 48 hours, wherever applicable.
- 7) E. & O. E.

Issuer: \*\*\*\*\*ONLINE PAYMENT\*\*\*\*\*

Receiver:  
Client ID: 13474141480  
Authorised Signatory:

*Junisha K. Shukla*

Authorised Signatory



Additional user details: Username: apb\_smzv  
IP Address: 172.22.58.122  
Zone: S.M. Zee Vision

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### REMITTANCE SLIP

PAYMENT DETAILS: (Please Tick) Mode of Payment ☐ Cheque ☐ Demand draft ☐ Cash

Cheque/DD No.	Name of the Bank	Branch	Date	Amount(Rs.)
				826.00

User ID  Customer's name

Invoice No.:  Invoice Date  Expiry Date

Customer's Signature \_\_\_\_\_

Channel Partner's Seal