Tax Invoice (ORIGINAL FOR RECIPIENT) Invoice No. Dated **MAHAVIR ENTERPRISES** ME/22/22-23 15-Apr-22 SHOP NO1, SUVARNA PLAZA, OPP IDBI BANK **Delivery Note** Mode/Terms of Payment 90 FEET IDBI BANK, BHAYANDER WEST. THANE 401101. Reference No. & Date. Other References GSTIN/UIN: 27HJZPS8438F1Z2 State Name: Maharashtra, Code: 27 Buyer's Order No. Dated E-Mail: yashsiroya@gmail.com Consignee (Ship to) Dispatch Doc No. **Delivery Note Date Wings Pharma** CABIN NO. 2, GALA NO.110, FIRST FLOOR, Destination Dispatched through KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE, Terms of Delivery BHIWANDI .DIST THANE GSTIN/UIN : 27AHUPD2259B1ZF State Name : Maharashtra, Code : 27 Buyer (Bill to) Wings Pharma CABIN NO. 2, GALA NO.110, FIRST FLOOR,

KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE,

: 27AHUPD2259B1ZF

BHIWANDI ,DIST THANE

GSTIN/UIN

St	ate Name : Maharashtra, Code :	27					
SI	Description of Goods	HSN/SAC	GST	Quantity	Rate	per	Amount
No.			Rate				
1	4m Baptize	85361010	18 %	4 pcs	2,889.83	pcs	11,559.32
2	6p Sprinkle	85361010	18 %	4 pcs	3,567.80	pcs	14,271.20
3	6m Aqua	85361010	18 %	4 pcs	3,355.93	pcs	13,423.72
4	HL High Load	85361020	18 %	9 pcs	542.37	pcs	4,881.33
5	Rc2-Remote Controller	84149030	18 %	3 pcs	584.75	pcs	1,754.25
6	2b Bell	85361010	18 %	1 pcs	1,288.14	pcs	1,288.14
7	2L lambue	85361010	18 %	1 pcs	1,076.27	pcs	1,076.27
8	2M-Drench	85361010	18 %	2 pcs	1,762.71	pcs	3,525.42
9	4F Baptize	85361010	18 %	1 pcs	3,067.80	pcs	3,067.80
							54,847.45
	Less: DISCOUNT						(-)1,963.53
	SGST						4,759.56
	CGST						4,759.56
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continued to page number 2

Tax Invoice(Page 2) (ORIGINAL FOR RECIPIENT) Invoice No. Dated **MAHAVIR ENTERPRISES** ME/22/22-23 15-Apr-22 SHOP NO1, SUVARNA PLAZA, OPP IDBI BANK Mode/Terms of Payment **Delivery Note** 90 FEET IDBI BANK, BHAYANDER WEST. THANE 401101. Reference No. & Date. Other References GSTIN/UIN: 27HJZPS8438F1Z2 State Name: Maharashtra, Code: 27 Buver's Order No. Dated E-Mail: yashsiroya@gmail.com Consignee (Ship to) Dispatch Doc No. **Delivery Note Date** Wings Pharma CABIN NO. 2, GALA NO.110, FIRST FLOOR, Dispatched through Destination KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE, Terms of Delivery BHIWANDI .DIST THANE GSTIN/UIN : 27AHUPD2259B1ZF : Maharashtra, Code: 27 State Name Buyer (Bill to) Wings Pharma CABIN NO. 2, GALA NO.110, FIRST FLOOR, KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE, BHIWANDI, DIST THANE GSTIN/UIN : 27AHUPD2259B1ZF State Name : Maharashtra, Code: 27 SI Description of Goods HSN/SAC **GST** Quantity Rate per Amount Rate No. Less: **ROUND OFF** (-)0.04Total 29 pcs ₹ 62,403.00 Amount Chargeable (in words) E. & O.E **INR Sixty Two Thousand Four Hundred Three Only**

Taxable	Ce	ntral Tax	St	ate Tax	Total
Value	Rate	Amount	Rate	Amount	Tax Amount
52,883.9	2 9%	4,759.56	9%	4,759.56	9,519.12
Total: 52,883.9	2	4,759.56		4,759.56	9,519.12

INR Nine Thousand Five Hundred Nineteen and Twelve paise Only Tax Amount (in words):

Company's Bank Details

: INDUSIND BANK Bank Name We declare that this invoice shows the actual price of : 259112332385 A/c No. the goods described and that all particulars are true

BHAYANDER EAST & INDB0000582 and correct. Branch & IFS Code :

for MAHAVIR ENTERPRISES Customer's Seal and Signature

Authorised Signatory

Tax Invoice

Invoice No. Dated **MAHAVIR ENTERPRISES** ME/22/22-23 15-Apr-22 SHOP NO1, SUVARNA PLAZA, OPP IDBI BANK **Delivery Note** Mode/Terms of Payment 90 FEET IDBI BANK, BHAYANDER WEST. THANE 401101. Other References Reference No. & Date. GSTIN/UIN: 27HJZPS8438F1Z2 State Name: Maharashtra, Code: 27 Buyer's Order No. Dated E-Mail: yashsiroya@gmail.com Consignee (Ship to) Dispatch Doc No. **Delivery Note Date** Wings Pharma CABIN NO. 2, GALA NO.110, FIRST FLOOR, Destination Dispatched through KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE, Terms of Delivery BHIWANDI .DIST THANE GSTIN/UIN : 27AHUPD2259B1ZF State Name : Maharashtra, Code : 27 Buyer (Bill to) Wings Pharma CABIN NO. 2, GALA NO.110, FIRST FLOOR, KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE, BHIWANDI ,DIST THANE GSTIN/UIN : 27AHUPD2259B1ZF State Name : Maharashtra, Code : 27

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							E 1 0 1 7 1 E	
							54,847.45	
	Less: DISCOUNT						(-)1,963.53	
	SGST						4,759.56	
	CGST						4,759.56	
continued to page number 2								

Tax Invoice(Page 2) (DUPLICATE FOR TRANSPORTER) Invoice No. Dated **MAHAVIR ENTERPRISES** ME/22/22-23 15-Apr-22 SHOP NO1, SUVARNA PLAZA, OPP IDBI BANK Mode/Terms of Payment **Delivery Note** 90 FEET IDBI BANK, BHAYANDER WEST. THANE 401101. Reference No. & Date. Other References GSTIN/UIN: 27HJZPS8438F1Z2 State Name: Maharashtra, Code: 27 Buver's Order No. Dated E-Mail: yashsiroya@gmail.com Consignee (Ship to) Dispatch Doc No. **Delivery Note Date** Wings Pharma CABIN NO. 2, GALA NO.110, FIRST FLOOR, Dispatched through Destination KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE, Terms of Delivery BHIWANDI .DIST THANE GSTIN/UIN : 27AHUPD2259B1ZF : Maharashtra, Code: 27 State Name Buyer (Bill to) Wings Pharma CABIN NO. 2, GALA NO.110, FIRST FLOOR, KAILASH COMPLEX, HOUSE NO 374, NEAR CENTER POINT HOTEL, PURNA VILLAGE, BHIWANDI, DIST THANE GSTIN/UIN : 27AHUPD2259B1ZF State Name : Maharashtra, Code: 27 SI Description of Goods HSN/SAC **GST** Quantity Rate per Amount Rate No. Less: **ROUND OFF** (-)0.04Total 29 pcs ₹ 62,403.00 Amount Chargeable (in words) E. & O.E

INR Sixty Two Thousand Four Hundred Three Only

Taxable	Ce	ntral Tax	St	ate Tax	Total
Value	Rate	Amount	Rate	Amount	Tax Amount
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Total: 52,883.9	2	4,759.56		4,759.56	9,519.12

INR Nine Thousand Five Hundred Nineteen and Twelve paise Only Tax Amount (in words):

Company's Bank Details

Bank Name : INDUSIND BANK We declare that this invoice shows the actual price of : 259112332385 A/c No. the goods described and that all particulars are true

BHAYANDER EAST & INDB0000582 and correct. Branch & IFS Code

for MAHAVIR ENTERPRISES Customer's Seal and Signature

Authorised Signatory