

GR No :- 123345

PAN No.		XXXXXXXXXXXXXXXXXX		GSTIN		CIN		XXXXXXXXXXXXXXXXXXXXXX	
From		To		Via Station		Mode		Vehicle No.	
XXXXXXXXXXXXXXXXXX		XXXX				XXXX		XXXXXX	
E-way Bill No.		Insurance		E-Way Bill Date		Valid Upto		Seal No.	
XXXXXXXXXXXX				Xx/xx/xxxx		Xx/xx/xxxx			
Consignor's Name & Address					Consignee's Name & Address				
METSO OUTOTEC INDIA PRIVATE LIMITED(752054) XX XX XXXXXXXXXXXXXXX XXXXXXXX State XX XX <u>GSTIN :</u> XXXXX XXXXXXXXXXXXX					XX XX XXXXX State XX XXXXX <u>GSTIN :</u> XXXXX Mobile No.- : XXXXXXXXXXXXXXXX				
Qty./ Pairs	No. of Pkgs	Type of Pkgs.	Contents	Invoice No.	Invoice Date	Invoice Value	Rate	Freight	
X	XX	XXX	XXXXXXXXXX	XXXXXXXXXX	XX/XX/XXXX	XXX,XX,XX			
Dimensions Weight :-			XXXXXXXXXXXX	Weight:- XXXXXX			Total : XXXXXXXX		
Payment Terms				GST Type		XXXXXXXXXXXXXXXXXXXXXXXXXX			
Cash	To Pay	To Be	At Branch	XXXXXXXXXXXXXX		Prepared By XXXXXXXXXXXXXXXX			
<input checked="" type="checkbox"/> XXXXXXXXXXXXXXX									
REMARKS Invoice no-XXXXXXXX									
THIS IS ELECTRONICAL Y SYSTEM GENERATED & AUTHORISED E-CONSIGNMENT NOTE INTENDED FOR CONSIGNORS ONLY									

AT OWNER RISK

IBA CODE :DLT-xxx

Tax Invoice

Bill To XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXX		Information Invoice No. XXXXXXXXXX Reference No. XXXXXXXXXX Invoice Date Customer PO No. Customer PO Date Order Ack No./Date XX.XX.XXXX Pack Slip No./Date XX.XX.XXXX GR No. Customer Code XXXXXXXX Contact Place of Supply XXXXXXX, XXX							
Ship To XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX		Consignor's Details PAN No. XXXXXXXX TAN No. XXXXXXXX							
Bill To Tax id GSTIN: XXXXXXXXX No. XXXXXX	Ship To Tax id GSTIN: XXXXXXXXXXXXXXXX PAN No. XXXXXXXXXXXXXXXX								
Additional Information Currency INR Incoterm FCA Freight Terms Paid Lorry No. XXXXXXXX Payment Terms xx xx xxx xxx xxxxxx IRN No. XX Remarks		OutboundDeliveryNo Total Quantity XXX.XXX No. of Boxes Gross Weight Net Weight E Way Bill XXXXXXXXXXXXXXX							
Item	Material Number/ HSN/SAC code	Description/	Quantity	UoM	Unit Price	Disc.	Net Amount	Tax Rate	Tax Amount
xxxx	XXXXXXXX	XXXXX, XXXXXXXXXXXXXXXX, XX. XXXXXXXXXXXX XXXXXXXX	xx.xx	EA	xxx.xx		xxxx.xx	XX.XXX%	xxx.xx
xxxx	XXXXXXXX	XXXXX, XXXXXXXXXXXXXXXX, XX. XXXXXXXXXXXX XXXXXXXX	xx.xx	EA	xxx.xx		xxxx.xx	XX.XXX%	xxx.xx
xxxx	XXXXXXXX	XXXXX, XXXXXXXXXXXXXXXX, XX. XXXXXXXXXXXX XXXXXXXX	xx.xx	EA	xxx.xx		xxxx.xx	XX.XXX%	xxx.xx
xxxx	XXXXXXXX	XXXXX, XXXXXXXXXXXXXXXX, XX. XXXXXXXXXXXX XXXXXXXX	xx.xx	EA	xxx.xx		xxxx.xx	XX.XXX%	xxx.xx
xxxx	XXXXXXXX	XXXXX, XXXXXXXXXXXXXXXX, XX. XXXXXXXXXXXX XXXXXXXX	xx.xx	EA	xxx.xx		xxxx.xx	xx.xxx%	xxx.xx
84749000									

XXXXX, XXXXXXXX, XXXXXXXXXXXXXXXX, XX
XXXXXX, XXXXXXXXXXXXXXXX, XXXXXXXXXXXXXXXX, XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX