

DELIVERY CHALLAN

COMFORT ON YOUR FINGER TIPS

Delivered To

Name: sanjay
Contact: 7827383846
Address: [Address Not Provided]
GSTN: [GSTN Not Provided]

Delivery Information

Challan No: CH-2025-002355
Date: 2025-09-22
Waybill No: [Waybill Not Provided]
Booking Date: [Booking Date Not Provided]
P.O. No: [PO Number Not Provided]

Purpose of Delivery:

☐ Sale ☐ Replacement ☐ Repair ☐ Demo

| S.No. | Model No. | Particulars | Quantity | Remarks |
|-------|-----------|--------------|----------|-----------------|
| 1 | 2989 | snds jxdfcdf | 1 | mabjsbdjasbndsa |

Receiver's Signature (Affix Company Stamp)

Name: sanjay
Date: 2025-09-22

Authorized Signature

For HOCH STANDARD SOLUTIONS
GSTIN: OBAJIHTIRBEIZ6