

Siddhivinayak Distributor

Shop no 10, Suyog Navkar Building A, Near 7 Loves Chowk, Market Yard Road, Pune 411 037. GSTIN: 27ABVPK5495R2Z9

DL.No: MH-PZ3517351,MH-PZ3517352

TAX INVOICE

Party Name: ARJUN CLINIC

Authorised Signatory

Address : PUNE, PUNE, Maharashtra India

Invoice No:	INV/2023-24/0123	Transport.:	
Invoice Date:	02-06-2023	Dispatch Date:	
Order No:	SO/2023-24/0124	Delivery:	
Order Date:	02-06-2023	Vehicle No:	

Sr.N o.	Product	Name	Pack	Mfr	Batch	Tot Qty	Exp Dt	HSN	MRP	Rate	Taxable	SGST	Value	CGST	Value	Amount
4	CEZONE 1G		Vial		C23B- 30B	2.00	31-01- 2025	3004201 9	62.31	24.20	48.40	6.00%	2.90	6.00%	2.90	54.20
CLA	SS TAX	KABLE	SCHEME	DISCO	UNT	SGST		CGST	TO	TAL GST						54.20
GST: 5	5.00%	0.00	0.00	0.0	0	0.00		0.00		0.00	Tota	al Items :-	[DIS AMT.		0.00
GST: 1	2.00% 48.	.4000	0.00	0.0	0	2.90		2.90		5.80	Total Qty :-		5	SGST PAYABLE		2.90
GST: 1	8.00%	0.00	0.00	0.0	0	0.00		0.00		0.00			(CGST PAYABLE		2.90
GST: 2	28.00% 0.00 0.00		0.0	0.00 0.00			0.00		0.00		ROUND OFF		F	-0.20		
TOTAL													7	ΓΟΤΑL		54.20
Amount	In Word : and Fif	ty Four on	ly													
Remark																
BANK DETAILS AS :- FOR Siddhivinayak Distributor																
Bank Name : Indian Bank Branch : Pune Cantonment branch ,Pune Account No. : 7469753553 IFSC Code :IDIB000P087									Gran	nd Total :	54.00					

Terms & Conditions

***Goods once sold will not be taken back or exchanged.
***We are not responsible for any shortage of goods in transit
***Bills not paid before due date will attract 24% interest.
All disputes subject to PUNE Jurisdiction only.Cheque Bounce Charges Rs.350