## PURCHASE ORDER

## Buyer, Siddhivinayak Distributor,

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

GSTIN: 27ABVPK5495R2Z9



## Supplier, Aloeshell Pharmaa LLP

Address: Office No. 25, Vastushree Complex, Market Yard, Pune- 411037, Pune,411037 Phone no: 9371232328

Email: aloeshellpharmaa@gmail.com

GSTIN: 27ABVFA5648J1ZQ

OR NO : PONO\_8 OR DT : 01-05-2023 SUP DT: 11-05-2023

TRPT NAME:

Sr No	Description of Goods	PACKIN G	HSN	Вох	Qty	MRP	RATE	GST	AMOUNT
1	SHELPHROD (1 POUCH)		30039011		150.00		192.41	3463.38	32324.88
2	SHELPUMP 30CAPS		30039011		41.00		836.00	4113.12	38389.12
3	COMBONUT 30 TAB		30049099		50.00		274.14	1644.84	15351.84
4	RAFEDOL - 650 MG		30049069		10.00		128.70	154.44	1441.44

Remark :				Total :		87507.00
Amount In Words : Eighty Seven Thousand Fi	ve Hundred and	I Seven		GST: As A	pplicable	
Terms & Conditions:	For, Siddhivinayak Distributor					
1) Subject to PUNE Jurisdiction 2) Ensure proper mention of Batch No. Expiry Da 3) Kindly supply from single Batch of long expiry. 4) Kindly ensure that products are stored under th 5) No changes in quantities/item permitted unless 6) Delivery will not be accepted on last day of mo 7) This order cancels all pending orders of above 8) Adjust all pending claim in this order.						
Expecting co-operation for our success	s. Thanking you			Authorized	l Signatory	