Tax Invoice

A		NUTRITIONNXT PRIVATE LIN 1-89/3/20, Ground Floor, A & A Lake Front, Durgam Cheru			oice No. IXT-3625 2	26-1	-1 Dated 17-Apr-25 Mode/Terms of Payment			
	lorem lorem	Madhapur , Hyderabad-500081 GSTIN/UIN: 36AAJCN4513D1ZP State Name : Telangana, Code : 36		Delivery Note				Mode/Terms of Payment		
		E-Mail : cherukury@nutritionnxt.com		Reference No. & Date.				Other References		
Consignee (Ship to) Ravi				Buyer's Order No.			Dat	Dated		
				Dis	patch Doc N	No.	De	livery	Note Date	
Address :Amaravathi Software,Sai Brundhavanam Colony,,Rajamahendravaram,Andhra Pradesh,533101				Dispatched through			Destination			
Buyer (Bill to) Ravi				Terms of Delivery						
Addr Colo		avathi Software,Sai Brundhavana ndravaram,Andhra Pradesh,533								
SI.No.	De	scription of Goods	HSN/S	AC	Quantity	Rate	per	Disc	Amount	
1 2	Parent Adult Parent Adult		230910 230910		1 NOS 1 NOS	430.01 430.00		70.49 70.00	430.01 430.00	
		CGST 9% OUTWARD CGST 9% OUTWARD ROUND OFF				9	% %		860.01 77.40 77.40 0.01	

Total

2 NOS

937.41

INR Thirteen Thousand Five Hundred Fi	fty Eight On	ly				E & O.E.
HSN/SAC	Taxable	CGST		SCGST/UTGST		Total Tax
HONONO	Value	Rate	Amount	Rate	Amount	Amount
23091000	11,489.52	9%	1,034.05	9%	1,034.05	2,068.10
Tota	l 11,489.67		1,034.05		1,034.05	2,068.10
		A/c Holder's Name :NUTRITIONNXT PRIVATE LIMITED Bank Name :STATE BANK OF INDIA-5824 A/c No. :43514325824 Branch & IFS Code :KOTHAGUDA & SBIN0015916 SWIFT Code :				
Declaration			f	or NUTR	RITIONNXT P	RIVATE LIMITED
We declare that this invoice shows the act the goods described and that all particular	•				Au	thorised Signatory

and correct.