

FAST AIR EXPRESS

DOMESTIC & INTERNATIONAL COURIER

New # 81, Old # 51, Thayar Sahib Street,
Venkatesa Naicken Street, 1st Floor,
Mount Road, Chennai - 600 002
Mobile : 98419 37703

| | | |
|--|--------------------------------|-------------------|
| FAST AIR EXPRESS Domestic & International Courier New No.81,Old No.51,Thayar Sathib St, Venkates Naicken Street,1 st Floor, Mound Road,Chennai- 600 002 Mobile:9841937703 GST No:33AIXPJ6114F1Z8 HSN/SAC CODE:996812 Email Id:fastairexpressmaa@gmail.com | Bill No:1346 | Date : 02.12.2024 |
| | Bill Period: November 2024 | Payment Terms |
| | Supplier's Rcf. | Vender Code: |
| TO: TRAVEL FOOD SERVICES PRIVATE LIMITED CENTRAL KITCHEN, NEXT TOS2 POLICE STATION,CHENNAI INTERNATIONAL TERMINAL CHENNAI-600027 GSTIN:33AADCB2762L1ZP | Buyer's Order No Telephonic | Dated: |
| | Despatched through | Auto |

| S. No. | Description | Amount |
|--------|---|----------|
| 1. | Particulars : November Monthly Charges for courier service Charges | 5810.00 |
| | FSC35% | 2033.00 |
| | SGST 9% | 705.50 |
| | CGST9% | 705.50 |
| | Grand Total | 9,254.00 |

AMOUNT CHARGEABLE(IN WORDS)

Rupees Nine Thousand Two Hundred and Fifty Four Only.

A declaration that "Tax is not Payble under reverse charge" mentioned in the invoice.

TERMS OF PAYMENT:

Please pay only A/C Payee cheque by favour of FAST AIR EXPRESS.

Payment should be made within seven days from bill date.

BANK DETAILS:

Bank Account Number : 0983201002608
Account Type : Current
Bank Name : CANARA BANK
Bank Address : CHINTADRI PET, CHENNAI-600002
Branch Code : 983
IFSC Code : CNRB0000983
MICR Code : 600015011
PAN Card No : AIXPJ6114F

For FAST AIR EXPRESS

Authorized Signatory

A. Srinivasan
03 Dec '24

M. Srinivasan
02/12/24





DTDC Express Limited
Regd. Office: No-3, Victoria Road
Bengaluru - 560047

ORIGIN: MIRAJ DEST: A0550
POUCH NO.: DATE: 21/11/24

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Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction.

The consignment note is not a tax invoice. A tax invoice will be made available by DTDC or its channel partner as the case may be, upon request.

1 Sender's (Consignor) Name: TRAVEL FOOD SERVICES Ph: _____
Company Name & Address: HR-DEPT CHENNAI-18
City: _____ State: _____ PIN Code: _____
Sender's GSTIN*: _____ *Where Applicable

2 Recipient's (Consignee) Name: Self Ph: _____
Company Name & Address: G02-801
City: _____ State: _____ PIN Code: _____
Recipient's GSTIN*: _____ *Where Applicable

3 Nature of consignment (✓) Dox Non-Dox Total Num Pcs: _____
DIM 1: L cm X B cm X H cm X Pcs Actual Wt.: kg
DIM 2: L cm X B cm X H cm X Pcs Volumetric Wt.: kg
DIM 3: L cm X B cm X H cm X Pcs Chargeable Wt.: kg

4 Description of Content: UNIFORM 1 BOX Total Value of consignment for carriage / E-Way bill: ₹ _____

5 Paper Work Enclosures

6 Type of consignment (✓) Commercial Non Commercial 7 Value Added Services: SECURE PACK 7.1 CN Expiry Date: _____

10 I/We declare that this consignment does not contain personal mail, cash, jewellery, contraband, illegal drugs, any prohibited items and commodities which can cause safety hazards while transporting

9 Charges Amount(₹)
a) Tariff (incl. of FSC+GST)
b) Value Added Service Charges
c) Risk Surcharge
d) Total amount (a+b+c)

8 Mode (✓) Surface Air Cargo Express
Consignment Number: D32317972

Sender's Signature & Seal
Date: _____ Time: _____ AM/PM
I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same.

Above charges are inclusive of GST & other taxes if applicable
Mode of Payment: Cash Card Wallet

11 Booking Branch / Franchisee Code
12 Risk Surcharge
Owner: _____
Carrier: _____

13 Receiver's Name: _____ Relationship: _____
Company Stamp & Signature: _____ Ph No.: _____ Date: 21-11-24 Time: _____ AM/PM

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DTDC Express Limited
Regd. Office: No-3, Victoria Road
Bengaluru - 560047

ORIGIN: MIRAJ DEST: A00018
POUCH NO.: DATE: 21/11/24

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Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction.

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1 Sender's (Consignor) Name: TFS Ph: _____
Company Name & Address: HR-DEPT CHENNAI-18
City: _____ State: CH-27 PIN Code: _____
Sender's GSTIN*: _____ *Where Applicable

2 Recipient's (Consignee) Name: MIANISHU Ph: _____
Company Name & Address: MUMBAI-18
City: _____ State: _____ PIN Code: _____
Recipient's GSTIN*: _____ *Where Applicable

3 Nature of consignment (✓) Dox Non-Dox Total Num Pcs: _____
DIM 1: L cm X B cm X H cm X Pcs Actual Wt.: kg
DIM 2: L cm X B cm X H cm X Pcs Volumetric Wt.: kg
DIM 3: L cm X B cm X H cm X Pcs Chargeable Wt.: kg

4 Description of Content: 1 BOX - FOOD LIA Total Value of consignment for carriage / E-Way bill: ₹ _____

5 Paper Work Enclosures

6 Type of consignment (✓) Commercial Non Commercial 7 Value Added Services: Not Available 7.1 CN Expiry Date: _____

10 I/We declare that this consignment does not contain personal mail, cash, jewellery, contraband, illegal drugs, any prohibited items and commodities which can cause safety hazards while transporting

9 Charges Amount(₹)
a) Tariff (incl. Of FSC + Taxes)
b) Risk Surcharge
c) Total amount (a+b)
Above charges are inclusive of GST & other taxes if applicable
Mode of Payment: Cash Card Wallet

8 Mode (✓) Surface Air Cargo Express
Consignment Number: C43700424

Sender's Signature & Seal
Date: _____ Time: _____ AM/PM
I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same.

11 Booking Branch / Franchisee Code
12 Risk Surcharge
Owner: _____
Carrier: _____

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| Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction. | | The consignment note is not a tax invoice. A tax invoice will be made available by DTDC or its channel partner as the case may be, upon request. | | POUCH NO. | DATE |
| 1 Sender's (Consignor) Name: <u>TSB/3R1091A</u> Ph: _____ | | 2 Recipient's (Consignee) Name: <u>PARAG BOOY</u> Ph: _____ | | Company Name & Address: _____ | |
| Company Name & Address: _____ | | City: _____ State: _____ PIN Code: _____ | | City: _____ State: <u>Booy</u> PIN Code: _____ | |
| Sender's GSTIN*: _____ | | Recipient's GSTIN*: _____ | | *Where Applicable | |
| 3 Nature of consignment (✓) <input checked="" type="checkbox"/> Dox <input type="checkbox"/> Non-Dox <input type="checkbox"/> Total Num Pcs: _____ | | 4 Description of Content | | Total Value of consignment for carriage / E-Way bill | |
| DIM 1: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Actual Wt.: _____ kg | | 5 Paper Work Enclosures | | 6 Type of consignment (✓) <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Non Commercial <input type="checkbox"/> 7 Value Added Services <input type="checkbox"/> Not Available <input type="checkbox"/> CN Expiry Date | |
| DIM 2: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Volumetric Wt.: _____ kg | | 8 Mode (✓) <input checked="" type="checkbox"/> Surface <input type="checkbox"/> Air Cargo <input type="checkbox"/> Express <input type="checkbox"/> | | Consignment Number: C43700550 | |
| DIM 3: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Chargeable Wt.: _____ kg | | 9 Charges Amount(₹) | | 11 Booking Branch / Franchisee Code | |
| 10 I/We declare that this consignment does not contain personal mail, cash, jewellery, contraband, illegal drugs, any prohibited items and commodities which can cause safety hazards while transporting | | a) Tariff (incl. Of FSC + Taxes) _____ | | 12 Risk Surcharge | |
| b) Risk Surcharge _____ | | c) Total amount (a+b) _____ | | Owner _____ | |
| Sender's Signature & Seal <u>25-11-24</u> | | Above charges are inclusive of GST & other taxes if applicable | | Carrier _____ | |
| Date: _____ Time: _____ AM/PM | | Mode of Payment: Cash <input type="checkbox"/> Card <input type="checkbox"/> Wallet <input type="checkbox"/> | | Courier Signature | |
| I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same. | | 11 Booking Branch / Franchisee Code | | 12 Risk Surcharge | |
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| Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction. | | The consignment note is not a tax invoice. A tax invoice will be made available by DTDC or its channel partner as the case may be, upon request. | | POUCH NO. | DATE |
| 1 Sender's (Consignor) Name: <u>TSB/104900 BARB</u> Ph: _____ | | 2 Recipient's (Consignee) Name: <u>SEH/140624</u> Ph: _____ | | Company Name & Address: _____ | |
| Company Name & Address: _____ | | City: _____ State: _____ PIN Code: _____ | | City: <u>PARHOBAD - 13100</u> State: _____ PIN Code: _____ | |
| Sender's GSTIN*: _____ | | Recipient's GSTIN*: _____ | | *Where Applicable | |
| 3 Nature of consignment (✓) <input checked="" type="checkbox"/> Dox <input type="checkbox"/> Non-Dox <input type="checkbox"/> Total Num Pcs: _____ | | 4 Description of Content | | Total Value of consignment for carriage / E-Way bill | |
| DIM 1: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Actual Wt.: _____ kg | | 5 Paper Work Enclosures | | 6 Type of consignment (✓) <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Non Commercial <input type="checkbox"/> 7 Value Added Services <input type="checkbox"/> Not Available <input type="checkbox"/> CN Expiry Date | |
| DIM 2: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Volumetric Wt.: _____ kg | | 8 Mode (✓) <input checked="" type="checkbox"/> Surface <input type="checkbox"/> Air Cargo <input type="checkbox"/> Express <input type="checkbox"/> | | Consignment Number: C43410938 | |
| DIM 3: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Chargeable Wt.: _____ kg | | 9 Charges Amount(₹) | | 11 Booking Branch / Franchisee Code | |
| 10 I/We declare that this consignment does not contain personal mail, cash, jewellery, contraband, illegal drugs, any prohibited items and commodities which can cause safety hazards while transporting | | a) Tariff (incl. Of FSC + Taxes) _____ | | 12 Risk Surcharge | |
| b) Risk Surcharge _____ | | c) Total amount (a+b) _____ | | Owner _____ | |
| Sender's Signature & Seal <u>6-11-24</u> | | Above charges are inclusive of GST & other taxes if applicable | | Carrier _____ | |
| Date: _____ Time: _____ AM/PM | | Mode of Payment: Cash <input type="checkbox"/> Card <input type="checkbox"/> Wallet <input type="checkbox"/> | | Courier Signature | |
| I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same. | | 11 Booking Branch / Franchisee Code | | 12 Risk Surcharge | |
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| Non Negotiable Consignment Note / Subject to Bengaluru Jurisdiction. | | The consignment note is not a tax invoice. A tax invoice will be made available by DTDC or its channel partner as the case may be, upon request. | | POUCH NO. | DATE |
| 1 Sender's (Consignor) Name: <u>TSB/104900</u> Ph: _____ | | 2 Recipient's (Consignee) Name: <u>ODDID</u> Ph: _____ | | Company Name & Address: _____ | |
| Company Name & Address: _____ | | City: _____ State: _____ PIN Code: _____ | | City: <u>Booy</u> State: _____ PIN Code: <u>99</u> | |
| Sender's GSTIN*: _____ | | Recipient's GSTIN*: _____ | | *Where Applicable | |
| 3 Nature of consignment (✓) <input checked="" type="checkbox"/> Dox <input type="checkbox"/> Non-Dox <input type="checkbox"/> Total Num Pcs: _____ | | 4 Description of Content | | Total Value of consignment for carriage / E-Way bill | |
| DIM 1: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Actual Wt.: _____ kg | | 5 Paper Work Enclosures | | 6 Type of consignment (✓) <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Non Commercial <input type="checkbox"/> 7 Value Added Services <input type="checkbox"/> Not Available <input type="checkbox"/> CN Expiry Date | |
| DIM 2: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Volumetric Wt.: _____ kg | | 8 Mode (✓) <input checked="" type="checkbox"/> Surface <input type="checkbox"/> Air Cargo <input type="checkbox"/> Express <input type="checkbox"/> | | Consignment Number: C43493208 | |
| DIM 3: L _____ cm X B _____ cm X H _____ cm X _____ Pcs Chargeable Wt.: _____ kg | | 9 Charges Amount(₹) | | 11 Booking Branch / Franchisee Code | |
| 10 I/We declare that this consignment does not contain personal mail, cash, jewellery, contraband, illegal drugs, any prohibited items and commodities which can cause safety hazards while transporting | | a) Tariff (incl. Of FSC + Taxes) _____ | | 12 Risk Surcharge | |
| b) Risk Surcharge _____ | | c) Total amount (a+b) _____ | | Owner _____ | |
| Sender's Signature & Seal <u>11-11-24</u> | | Above charges are inclusive of GST & other taxes if applicable | | Carrier _____ | |
| Date: _____ Time: _____ AM/PM | | Mode of Payment: Cash <input type="checkbox"/> Card <input type="checkbox"/> Wallet <input type="checkbox"/> | | Courier Signature | |
| I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same. | | 11 Booking Branch / Franchisee Code | | 12 Risk Surcharge | |
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