

Tax Invoice

(ORIGINAL FOR RECIPIENT)

 <b>LEGEND SANICURE PVT. LTD.</b> City Office: AA - 78, SECTOR - 1 SALT LAKE CITY, KOLKATA - 700064, W.B. Rrgd. Off. 9, R. N. T. P. Bye Lane Shyamnagar, North 24 Pgs -743127 Ph. : +91 9836705858 GSTIN/UIN: 19AACCL3723E1ZQ State Name : West Bengal, Code : 19 E-Mail : corporate@legendpms.in	Invoice No.	Dated
	LSPL/0054/24-25	2-May-24
Buyer (Bill to) <b>Travel Food Services Pvt. Ltd.</b> Airport Road, Dabolim Goa - 403801 GSTIN/UIN : 30AADCB2762L1ZV State Name : Goa, Code : 30	Delivery Note	Mode/Terms of Payment
	Reference No. & Date.	Against Monthly Invoice Other References
	Buyer's Order No.	Dated
	Agreement	26-Jul-22
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
		<b>Dabolim Airport, Goa</b>
Terms of Delivery		

Sl No.	Description of Services	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Integrated Pest Management Services</b> To Your Premises at : Dabolim Airport Goa	998539				35,200.00
		<b>IGST</b>				6,336.00
Total						<b>₹ 41,536.00</b>

Amount Chargeable (in words) E. & O.E

**Indian Rupees Forty One Thousand Five Hundred Thirty Six Only**

HSN/SAC	Taxable Value	IGST		Total Tax Amount
		Rate	Amount	
998539	35,200.00	18%	6,336.00	6,336.00
<b>Total</b>	<b>35,200.00</b>		<b>6,336.00</b>	<b>6,336.00</b>

Tax Amount (in words) : **Indian Rupees Six Thousand Three Hundred Thirty Six Only**

MSME NO.: UDYAM-WB-14-0020458

Company's PAN : AACCL3723E

Company's Bank Details  
 A/c Holder's Name : LEGEND SANICURE PVT. LTD  
 Bank Name : BANK OF INDIA A/C. NO. 401930110000040  
 A/c No. : 401930110000040  
 Branch & IFS Code : Southern Avenue & BKID0004019  
 SWIFT Code :

Declaration  
 We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

for LEGEND SANICURE PVT. LTD.  


