

Tax Invoice

(DUPLICATE FOR SUPPLIER)

LEGEND LEGEND SANICURE PVT. LTD. City Office: AA-7B SECTOR-1 SALT LAKE CITY KOLKATA - 700054 WB Regd. Off: B-11, T-1, Dye Lane Sreyashnagar, North 24 Pgs - 743127 Ph: +91 9830705858 GSTIN/UIN: UAAACCL3723E1ZQ State Name: West Bengal, Code: 19 E-Mail: corporate@legendprms.in	Invoice No.	Dated
	LSPL/0572/24-25	2-Dec-24
Buyer (Bill to)	Delivery Note	Mode/Terms of Payment
Travel Food Services Pvt. Ltd. Airport Road, Dabolim Goa - 403801	Reference No. & Date.	Against Monthly Invoice
GSTIN/UIN : 30AADCB2762L1ZV	Buyer's Order No.	Other References
State Name : Goa, Code 30	Agreement	Inv. Month: November, 2024
	Dispatch Doc No.	Dated
	Dispatched through	Delivery Note Date
	Terms of Delivery	Destination
	Dabolim Airport, Goa	
	DEPI: A.A	

SI No	Description of Services	HSN/SAC	Quantity	Rate	per	Amount
1	Integrated Pest Management Services To Your Premises at Dabolim Airport Goa	998539				35,200.00
	IGST					6,336.00
Total						₹ 41,536.00 E. & O.E

Documents Submission Details:

Location: Goa

Date: 05/12/24 Time: 11:55

Employee ID: 1021787

Name: Vinayak S

Department: IT

Signature: [Signature]

Amount Chargeable (in words)		Indian Rupees Forty One Thousand Five Hundred Thirty Six Only			
HSN/SAC	Taxable Value	IGST Rate	IGST Amount	Total Tax Amount	
998539	35,200.00	18%	6,336.00	6,336.00	
Total			6,336.00	6,336.00	

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

Remarks: MSME NO.: UDYAM-WB-14-0020458

Company's PAN : AACCL3723E

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

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 :
 for LEGEND SANICURE PVT. LTD.

This is a Computer Generated Invoice

