

Tax Invoice

(ORIGINAL FOR RECIPIENT)

MARICAN CARE MART #33/16 (7) G / F, Rajamannar St, T.Nagar Near HDFC Bank , Chennai - 600017 MBL : 7200003829 / 044 48650895 For Payment Gpay No : 9841060430 GSTIN/UIN: 33BPLPM5285E1ZQ State Name : Tamil Nadu, Code : 33 Contact : +91 72000 03829 E-Mail : marican.caremart@gmail.com Consignee (Ship to)	Invoice No. 141	Dated 30-May-24
	TRAVEL FOOD SERVICES CHENNAI PVT LTD Near S2 Airport Police Station, Chennai International Airport, +91 98844 00023, Chennai GSTIN/UIN : 33AAECT8192M1ZS State Name : Tamil Nadu, Code : 33	Delivery Note
Buyer (Bill to) TRAVEL FOOD SERVICES CHENNAI PVT LTD Near S2 Airport Police Station, Chennai International Airport, +91 98844 00023, Chennai GSTIN/UIN : 33AAECT8192M1ZS State Name : Tamil Nadu, Code : 33	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
Terms of Delivery		

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	DISPENSER M FOLD		2 box	650.00	box	1,300.00
	CGST					117.00
	SGST					117.00
Total			2 box			₹ 1,534.00

Travel Food Services Chennai Pvt. Ltd.
 * INWARD *
 Revenue Assurance Dept
 Date: 30/5/24 Time: 1820
 S.No: 21
 RA Sign & ID: [Signature]

TRAVEL FOOD SERVICES CHENNAI PVT. LTD.
 STORES
 INWARD
 Date: 30/5/24 Time:
 S.No: 3160
 Stores Sign & ID: [Signature]

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

INR One Thousand Five Hundred Thirty Four Only

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
	1,300.00	9%	117.00	9%	117.00	234.00
Total	1,300.00		117.00		117.00	234.00

Tax Amount (in words) : **INR Two Hundred Thirty Four Only**



Company's Bank Details
 A/c Holder's Name: **MARICAN CARE MART**
 Bank Name : **HDFC**
 A/c No. : **50200070189316**
 Branch & IFS Code: **T.Nagar & HDFC0000206**

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

for **MARICAN CARE MART**

 Authorised Signatory