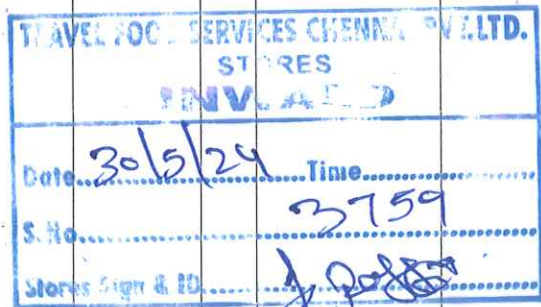


**Tax Invoice**

(ORIGINAL FOR RECIPIENT)

<b>MARICAN CARE MART</b> #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	Invoice No.	Dated
	142	30-May-24
Consignee (Ship to) <b>TRAVEL FOOD SERVICES CHENNAI PVT LTD</b> Near S2 Airport Police Station, Chennai International Airport, +91 98844 00023, Chennai GSTIN/UIN : 33AAECT8192M1ZS State Name : Tamil Nadu, Code : 33	Delivery Note	Mode/Terms of Payment
	Reference No. & Date.	Other References
Buyer (Bill to) <b>TRAVEL FOOD SERVICES CHENNAI PVT LTD</b> Near S2 Airport Police Station, Chennai International Airport, +91 98844 00023, Chennai GSTIN/UIN : 33AAECT8192M1ZS State Name : Tamil Nadu, Code : 33	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	<b>DISPENSER M FOLD</b>		<b>2 box</b>	650.00	box	<b>1,300.00</b>
	<b>CGST</b>					<b>117.00</b>
	<b>SGST</b>					<b>117.00</b>
<b>Total</b>			<b>2 box</b>			<b>₹ 1,534.00</b>



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
<b>Total</b>	<b>1,300.00</b>		<b>117.00</b>		<b>117.00</b>	<b>234.00</b>

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