

TFS Kolkata - KFC SOE				DKG Sales		Remamrk
S.No	Item Name	Unit	Quantity	Qot Rate	Amount	
1	Basket Breading Pop Corn	Nos	2	825	1650	12%
2	Diffuser For Sauce Gun (1x10)	Nos	20	132	2640	18%
3	Sauce Gun 1 3 Oz Franke	Nos	2	3850	7700	18%
4	GN Pan 1 6 150MM	Nos	6	441	2646	12%
5	Tupperware-Rice keeper 10Kg	Nos	4	924	3696	18%
6	GN Pan 1 6 lid	Nos	6	83.3	499.8	12%
7	Frieght Charges	Nos	1	2000	2000	18%
					<b>20,831.80</b>	
					<b>575.50</b>	
					<b>2,886.48</b>	
					<b>24,293.78</b>	

**PROFORMA INVOICE**

ISS ORDER NO:	DD_3438
ORDER DATE:	13-09-2024

**Billing Address**  
TRAVEL FOOD SERVICES PVT. LTD.  
SUNWAY 6888, 83, GATE NO 3 C, NSCB  
INTERNATIONAL, KAJI NAGARULGLAM SARANI, DUM DUM,  
KOLKATA - 700012, WEST BENGAL, INDIA

**Shipping Address**  
TRAVEL FOOD SERVICES PVT. LTD.  
SUNWAY 6888, 83, GATE NO 3 C, NSCB  
INTERNATIONAL, KAJI NAGARULGLAM SARANI, DUM DUM,  
KOLKATA - 700012, WEST BENGAL, INDIA

State No.	WB88
Kind Code	MV - KUPESH KUMAR
Phone	+91 9836422185
Email ID	Subrata.kolhat@travelfoodservices.com

GST:	29AAAC1810L1Z1
PAN:	AAAC1810L
Modification details (if any)	2 dated - 3 dated 13-09-2024

S. No.	Code	Description	Unit	Qty	Amount (Rs)	
					Unit Price	Amount
1	-	ITEM AS PER ANNEXURE - 1	LS	1	4,790.00	4,790.00

Payment Terms	100% Advance with PO
Validity	07 days (Subject to limit of GST after 30.06.17)
Price Basis	Ex-Warehouse
Delivery Period	App. 5 to 6 Months or subject to availability

Total Amount (Rounded off)	4,790.00
Packaging & forwarding Charges	INCLUDED
Nett total	4,790.00
Total Ex-Warehouse Price	4,790.00
Freight	INCLUDED
State Entry Tax / Octroi	TO PAY
Insurance	BY CLIENT
<b>GRAND TOTAL</b>	<b>4,790.00</b>
Amount Received	-
Net Receivable / (Payable)	-
	-
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	-

BANK DETAILS	
Beneficiary	Stellar Gastronoom Private Limited
Bank	ICICI MAHINDRA BANK
Branch	28 Community Center, Naraina Industrial Area, Phase-1, New Delhi - 110028
Bank A/c	671215677
IFSC Code	ICIC0000016

**IMPORTANT :**  
Please quote our ref in all future correspondence  
Refer to our "Terms and conditions of sale"  
(If not annexed, please ask for it)

This is a computer generated document, hence does not require any signature

**STELLAR GASTRONOOM PRIVATE LIMITED (CIN - U74999WB2013PC000074) (GST: 09AAAC1810L1Z1)**  
Registered Office - A-2, 1st Floor, Shopping Centre, Naraina Industrial Area, Phase-1, New Delhi - 110028  
Phone - +91-11-42517300, +91-9800994724, Write to us at - kenzale@stellargastronoom.com  
Warehouse Address - A-17, Sec-A-3, Tronica City, Ind. Area, Tronica City, Ghaziabad, U.P-201102

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**STELLAR**  
REFRIGERATORS, SLASH CHILLERS, COLD ROOMS

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Registered Office - A-2, 1st Floor, Shopping Centre, Naraina Industrial Area, Phase-1, New Delhi - 110028  
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**SINGLE VENDOR DECLARATION**

Date: 16-09-2024	PO No: TFSKPL/PO/24-25/000157
Vendor Name: Stellar Gastronom Private Limited	
Product Description: SOE	Unit / Project Name: Subway
<b>Justification:</b>	
Specific Material procure by (As per Same material Procure by Subway	<b>Only known supplier.</b> (List of the suppliers which were contacted below and the specific reasons why each was not a viable source).
	<b>Only known qualified supplier or item.</b> (List the qualifications that each source or items meet. If another supplier offers a similar item, provide the item identification, supplier information and comparable pricing).
	<b>Supplier proprietary item.</b> (The selected supplier is the only manufacturer of this item. List the reasons why no substitute item can be used and if no similar item is available).
	<b>Franchise / Management / User Dept Directed.</b> (Provide a copy of letter, or memo or e-mail specifically directing this source) vendor already work with us on same location.
	<b>Item / Rate Contracted.</b> (Provide copy of the contract / agreement)
 Prepared By	 Approved By

## SINGLE VENDOR DECLARATION

Date: 16-09-2024	PO No: TFSKPL/PO/24-25/000157
Vendor Name: Stellar Gastronom Private Limited	
Product Description: SOE	Unit / Project Name: Subway
<b>Justification:</b>	
<u>Specifique Material procure by (As per Same material Procure by Subway</u>	<b>Only known supplier.</b> ( <u>List of the suppliers</u> which were contacted below and the specific reasons <u>why each was not a viable source</u> ).
	<b>Only known qualified supplier or item.</b> (List the qualifications that each source or items meet. If another supplier offers a similar item, <u>provide the item identification, supplier information and comparable pricing</u> ).
	<b>Supplier proprietary item.</b> (The selected supplier is the only manufacturer of this item. List the reasons why no substitute item can be used and if no similar item is available).
	<b>Franchise / Management / User Dept Directed.</b> (Provide a copy of letter, or memo or e-mail specifically directing this source) vendor already work with us on same location.
	<b>Item / Rate Contracted.</b> (Provide copy of the contract / agreement)
Prepared By	Approved By