

TAX INVOICE

SUPERGAS™

HIMACHAL OXYGEN LTD.

Manufacturer : OXYGEN & NITROGEN GASES
 Auth. Franchisee : SHV Energy P. Ltd.
 Work & Office : Vill. Satiwala, Paonta Sahib, 173 025 (H.P.)
 PHONE : 093185 16750, 93186 46189
 E-mail : vishenergies@gmail.com

Original for Recipient/Duplicate for Recipient/Triplicate for Transporter/Quarduplicat for Supplier

Invoice Serial Number : **348**
 Invoice Date : **3/3/2024**
 Delivery Challan No :
 Delivery Challan Date :
 Purchase Order No :
 Purchase Order Date :

GSTIN Number : **02AAACH5177N1ZG**

PAN No. : **AAACH5177N**

Tax is Payable On Reverse Charge(Yes/No) :

Drug L. No. : **N-MB/18/198**

State Code **02**

Details of Consignee

Name : **P. D. NAMAN**
 Address :

GSTIN :
 State : **(MP)**
 CIN No. :

State Code **02**

Transportation Mode :
 Vehicle Number :
 Date & Time of Supply : **14071 = 4176**
 Place of Supply : **NAMAN HD**

S. No.	Description of Product/Service	HSN ACS	Qty.	Cubic mtr.	Rate	Amount
	Medical Oxygen Gas	2804080	D-Type	1		
			B-Type	2	75/-	150/-

Total Amount in Words : _____

Total Amount : **RS. 168 = 00/-**

Freight Charges

Other Charges

Total Amount Before Tax **150 = 00**

Add : CGST @ 9% **9 = 00**

Add : SGST @ 9% **9 = 00**

Add : IGST @ 18%

Total amount : GST **18 = 00**

Total amount after tax **168 = 00**

Empty cylinder received

S.No.	Cyl Size	Filled Cyl	Empty Cyl	Holding of Cylinders
		(2)	(2)	

Certified that the particulars given above are true and correct.

For HIMACHAL OXYGEN LTD.


 Auth. Signatory

Customer Seal & Signature