

Alaknanda Systems
531/10, GARDEN ROAD, BARA CHANDGUNJ, LUCKNOW
Tel: 0522-4044280
GSTIN: 09ABCFA1930E1ZX

Duplicate for Supplier

					1	'ax Invo	oice	;								
Invoice No:		AS/23	-24/08	6	-			P.O. Number			Verbal					
	ce date:	17-08-	2023					Date Of P.C			Dai					
	rse Charge (Y/N):					N			Date of Supply:							
State:		Uttar Pradesh				Code	09	Place of Su								
									.,,							
Management		Bill to Party								Shi	p to P	artv				
Name: Address:		DCDC Kidney Care						Name:	 -							
Address:		Awadh Hospital, Lucknow						Address:								
GSTIN:		0											2000			
State:		Uttar Pradesh				Code 09		GSTIN: State:	- Uttar Pradesh							
													Code 09			
S. No.	Bank in the	HSN					D:									
J. NO.	Product Description	code	UOM	Qty	Rate	Amount	Disc	Taxable Value	Rate	CGST		SGST		IGST		
1	Supply of CO2 type 4.5kg Fire	8424	Nos	1	F 100 00	5 400					Rate	Amount	Rate	Amount		
	Extinguisher	0424	INOS	1	5,100.00	5,100.00		5,100.00	9%	459.00	9%	459.00		-		
										2						
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	Total			1		5,100.00	0	5100.00		459.00		459.00				
	7	otal Inv	oice a	mour	nt in words				Total	Amount be	foro	500000000000000000000000000000000000000				
										Add: CGST				5,100.00		
	F	ghteen only				Add: SGST					459.00					
						*			Add: IGST					459.00		
									Total Tax Amount 918					918.00		
UAN -UP50E0000785									Roundoff					-		
2.00000703									Discount							
Bank Details									Total Amount after Tax:					6,018.00		
Sank Name: BANK OF BARODA (CC)										on Reverse				0		
ank A/C : 56810500000044									Ceritified that the particulars given above are true and correct							
ank IFSC: BARBONIRALA (Fifth Character is Zero)									For Alakhanda Systems							
ranch : NIRALA NAGAR LUCKNOW						20										
erms & conditions						Checked by										
We declare that this invoice shows the actual price of the						Checked by				*	11	1				
ervices	s described and that all partic	ulars ar	e true	and c	orrect					\	0/1	13/				
terest	of 18% will be charged if 100	% paym	nent is	not m	ade within 30	davs of issue	of Inve	nice		A	11,	واعدة	f			
	erest of 18% will be charged if 100% payment is not made within 30 days of issue of Invoice										Authorised signatory					