SIDRAMESHWAR PHARMACEUTICAL DISTRIBUTORS

SECTOR NO.11 PLOT NO.D-3
NEAR VISHWAS SAMESH TEMPLE NAVANAGAR
BAGALKOT-587103
PHONE : 9972341015, 8073170490, 8050496053
D.L.No. : KA-BT1-206-14(20B), 206-15(21)
GSTIN : 29ABCFS4485F1ZU

GST INVOICE

CREDIT

Invoice No	61508	Order No. 145-102024-2 Order Date 04-10-2024	Page 1
Invoice Date	22-10-2024	L.R. No. L.R. Date 22-10-2024	

Party Name
MODI HEALTH SERVICE PVT LTD

S.	Qty	Mfr	Pack	Product Name	Batch	Exp	HSN	M.R.P.	Rate	Dis	GST	Amount	Net Amount
1.	288	MEX	10	NS 100ML 5455	410044	3/24	30049099	78.05	22.00	5.00	12.00	6336.00	7096.32

Sent No. of Boxes Received 12 Box
Subject to Physical Check
Name/Employee Code Somesh M. Talawadi
Centre Name CK 14 Panchgani
Date 23 Sept 2024
Signature M. No. 9972341015

CLASS	TOTAL	SCHEME	DISCOUNT	IGST		TOTAL IGST
IGST 5.00%	0.00	0.00	0.00	0.00	0.00	0.00
IGST 12.00%	6336.00	0.00	0.00	760.32	0.00	760.32
IGST 18.00%	0.00	0.00	0.00	0.00	0.00	0.00
IGST 28.%	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	6336.00	0.00	0.00	760.32	0.00	760.32

Total Items :- 1
Total Qty :- 288

TOTAL	6336.00
DIS AMT	0.00
IGST PAYBLE	760.32
PAYBLE	0.00
CR/DR NOTE	0.00

Rs. Seven Thousand Ninety Six Only

Grand Total
7096.00

Terms & Conditions
Goods once sold will not be taken back or exchanged.
BANK DETAIL AC/42112010000041,IFSC/CNRB0016853,CANARA BANK,NAVANAGAR
Bills not paid due date will attract 24% interest.

FOR SIDRAMESHWAR PHAMACEUTICAL DISTRIBUTORS

Authorised Signatory

Our Software MAPSI Ely 7208Sep000 Al-1320264