

## PROFORMA INVOICE

<b>Vastukala Consultants (I) Pvt Ltd</b> B1-001,U/B FLOOR, BOOMERANG,CHANDIVALI FARM ROAD, ANDHERI-EAST 400072 GSTIN/UIN: 27AADCV4303R1ZX State Name : Maharashtra, Code : 27 E-Mail : accounts@vastukala.org	Invoice No. <b>ADVANCE175/23-24</b>	Dated <b>28-Dec-23</b>
Buyer (Bill to) <b>Suasth Health care india Pvt ltd Plot no 1,</b> Sector 20,Road Pali Kalamboli State Name : Maharashtra, Code : 27	Delivery Note	Mode/Terms of Payment <b>ADVANCE</b>
	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	Dispatch Doc No. <b>005969</b>	Delivery Note Date
	Dispatched through	Destination
Terms of Delivery		

SI No.	Particulars	HSN/SAC	GST Rate	Amount
1	<b>VALUATION FEE</b> <i>(Technical Inspection and Certification Services)</i>	997224	18 %	<b>60,000.00</b>
	<b>CGST</b>			<b>5,400.00</b>
	<b>SGST</b>			<b>5,400.00</b>
<b>Total</b>				<b>70,800.00</b>

Amount Chargeable (in words) *E. & O.E*

**Indian Rupee Seventy Thousand Eight Hundred Only**

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
997224	60,000.00	9%	5,400.00	9%	5,400.00	10,800.00
<b>Total</b>	<b>60,000.00</b>		<b>5,400.00</b>		<b>5,400.00</b>	<b>10,800.00</b>

Tax Amount (in words) : **Indian Rupee Ten Thousand Eight Hundred Only**

Company's Bank Details

Bank Name : **State Bank of India**

A/c No. : **32632562114**

Branch & IFS Code: **MIDC Andheri (E) & SBIN0007074**



UPI Virtual ID : vastukala@icici

Remarks:

005969 ADVANCE INVOICE OF NISHKALA HEALTHCARE PRIVATE LIMITED Suasth Health care india Pvt ltd Plot no 1,Sector 20,Road Pali Kalamboli

Company's PAN : **AADCV4303R**

Declaration

NOTE – AS PER MSME RULES INVOICE NEED TO BE CLEARED WITHIN 45 DAYS OR INTEREST CHARGES APPLICABLE AS PER THE RULE.

MSME Registration No. - 27222201137

Customer's Seal and Signature

**for Vastukala Consultants (I) Pvt Ltd**

Authorised Signatory

This is a Computer Generated Invoice