

INVOICE
Proforma Invoice

SHARADKUMAR B CHALIKWAR B1-001,U/B FLOOR,BOOMERANG BLDG, CHANDIVALI FARM ROAD,ANDHERI-E, MUMBAI-400072 GSTIN/UIN: 27AEAPC0117Q1ZQ State Name : Maharashtra, Code : 27	Invoice No. 24-25/AUG/004	Dated 23-Aug-24
	Delivery Note	Mode/Terms of Payment AGAINST REPORT
	Reference No. & Date.	Other References
Buyer (Bill to) Susmita De Commercial Capital Gain No. 203, 2nd Floor, Building No 2, Wing - A, Blue Nile, Pacific Enclave CHSL, Near Hiranandani Hospital , Opp IIT Main Gate , Village - Powai, Powai, Mumbai, State - Maharashtra, India State Name : Maharashtra, Code : 27	Buyer's Order No.	Dated
	Dispatch Doc No. 009769/2307817	Delivery Note Date
	Dispatched through	Destination
	Terms of Delivery	

SI No.	Particulars	HSN/SAC	Amount
1	VALUATION CHARGES (NON GST)		10,000.00
Total			₹ 10,000.00

Amount Chargeable (in words)

Indian Rupees Ten Thousand Only

Remarks:

009769/2307817 Mrs. Susmita De - Residential
Flat No. 203, 2nd Floor, Building No. 2, Wing – A,
Blue Nile, "Pacific Enclave Co-Op. Hsg. Soc. Ltd.",
Pacific Enclave, Near Hiranandani Hospital, Opp. IIT
Main Gate, Powai, Mumbai, Pin – 400 076, State –
Maharashtra, Country – India

Company's PAN : **AEAPC0117Q**

Company's Bank Details

Bank Name : **STATE BANK OF INDIA**

A/c No. : **10537702176**

Branch & IFS Code: **APMC BRANCH NANDED & SBIN0005935**



UPI Virtual ID : **942217100@OKBIZAXIS**

FOR SHARADKUMAR B CHALIKWAR