

Tax Invoice

ARYAN ENTERPRISES PLOT NO-5,GALI NO-3A NEAR SHEETLA MATA MANDIR SEC-5 ROAD,GURUGRAM-122001 MSME NO. UDYAM-HR-05-0000604 GSTIN/UIN: 06BENPK5619D1Z1 State Name : Haryana, Code : 06 E-Mail : aryanenterprises.bisleri@gmail.com <hr/> Buyer (Bill to) Krisumi Corporation Pvt. Ltd Sec36A Gurgaon GSTIN/UIN : 06AAECV0565A1ZR State Name : Haryana, Code : 06 Place of Supply : Haryana	Invoice No.	Dated
	705	30-Nov-24
	Delivery Note	Mode/Terms of Payment
	Reference No. & Date.	Other References
	Buyer's Order No.	Dated
	Dispatch Doc No.	Delivery Note Date
	Dispatched through	Destination
Terms of Delivery		


SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Amount
1	20 LTR WATER JAR	2201	12 %	549.00 BTL	70.00	BTL	38,430.00
2	250 MI Carton Box Bisleri	2201	18 %	650 Box	110.17	Box	71,610.50
							1,10,040.50
	SGST						8,750.75
	CGST						8,750.75
	Total						₹ 1,27,542.00

GATE IN
 NO. 456
 DATE 02/11/24
 KRISUMI CORPORATION
Rahim

Amount Chargeable (in words) **INR One Lakh Twenty Seven Thousand Five Hundred Forty Two Only** E. & O.E

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
2201	38,430.00	6%	2,305.80	6%	2,305.80	4,611.60
2201	71,610.50	9%	6,444.95	9%	6,444.95	12,889.90
Total	1,10,040.50		8,750.75		8,750.75	17,501.50

Tax Amount (in words) : **INR Seventeen Thousand Five Hundred One and Fifty paise Only**

Company's PAN : BENPK5619D	Company's Bank Details
Declaration We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.	A/c Holder's Name: ARYAN ENTERPRISES
Customer's Seal and Signature	Bank Name : Punjab National Bank
	A/c No. : 0071101100209
	Branch & IFS Code: New Railway Road & PUNB0007110
	for ARYAN ENTERPRISES 



1922AMH/कारपरेसन शब22-36

ARYAN ENTERPRISES

Near Sheetla Mata Mandir, Sector-5 Road, Gurgaon

E-Mail : aryanenterprises111@gmail.com

Cell No.: 9711686634, 9718068203 GSTIN: 06BENPK5619D1ZI

Name..... Krisumi Corporation Pvt Ltd

Address..... sector-36

Contact Person..... Contact No.....

S.No	Date	Fill Bottles	Empty Bottles	Balance	Customer's Sign.	Sign.	Remarks
1	2-11-24	31	31	90	<i>[Signature]</i>		
2	4-11-24	35	35	90	<i>[Signature]</i>		
3	5-11-24	18	18	90	<i>[Signature]</i>		100 boxes 250ml
4	6-11-24	22	22	90	<i>[Signature]</i>		
5	7-11-24	17	17	90	<i>[Signature]</i>		
6	8-11-24	17	17	90	<i>[Signature]</i>		
7	09/11/24	24	24	90	<i>[Signature]</i>		100 pake (EXTRA 10-BOTTLE)
8	10-11-24	20	20	90			
9	11-11-24	40	40	90	<i>[Signature]</i>		
10	12-11-24	18	18	90	<i>[Signature]</i>		
11	13-11-24	19	19	90	<i>[Signature]</i>		50 boxes 250ml
12	14-11-24	20	20	90	<i>[Signature]</i>		
13	15-11-24	25	25	90	<i>[Signature]</i>		100 boxes 250ml
14							
15							
16							
17	17/11/24	42	42	90	<i>[Signature]</i>		
18	18-11-24	14	14	90	<i>[Signature]</i>		
19	19-11-24	14	14	90	<i>[Signature]</i>		100 boxes 250ml
20							
21	21-11-24	32	32	90	<i>[Signature]</i>		
22	22-11-24	13	13	90	<i>[Signature]</i>		
23	23-11-24	15	15	90	<i>[Signature]</i>		100 boxes 250ml
24							
25	25-11-24	28	28	90	<i>[Signature]</i>		
26	26-11-24	18	18	90	<i>[Signature]</i>		
27	27-11-24	20	20	90	<i>[Signature]</i>		
28	28-11-24	15	15	90	<i>[Signature]</i>		100 boxes 250ml
29							
30	30/11/24	32	32	90	<i>[Signature]</i>		
31							
TOTAL		<u>549</u>		<u>650</u>	<u>250ml</u>		

BEFORE GIVING CASH PAYMENT PLEASE CALL AT : 9711686634