

CHALY HEALTHWARE PVT LTD
16, SKYLINE GREENWOODS PADAMUGAL
Kakkanad, Ernakulam - 682030
Mob+91-9846050488

GSTIN:32AABCC5812E1ZA

PROFORMA INVOICE

Principal, JSS Medical College

Invoice No and
Date

Purchase
Order No and
date

Terms of
Delivery, if any

Invoice No and
Date

14
01-17-2023

Shivarathreeswara Nagar, Mysre- 570015

SI NO

HSN

PRICE

QTY NOS

NET VALUE

SGST @2.5%

IGST @2.5%

CGST@%

TOTAL INR

1

UP TO DATE E- Journal
Subscription for 1 year,
(01/03/2023 to 28/02/2024)

998431

10,60,000

1

10,60,000

0.00

10,60,000.00

Total

*A28:129

GRAND TOTAL

10,60,000.00

10,60,000.00

Rupees. Ten Lakhs Sixty Thousand only



For CHALY HEALTHWARE PVT. LTD.

Managing Director

Validity : 30 days

Payment 100% Advance along with order

For GST exemption, Declaration has to be given in prescribed format

OUR BANK DETAILS

ACCOUNT NAME: CHALY HEALTHWARE PVT LTD

BANK NAME: CSB BANK

BRANCH: MARKET ROAD, ERNAKULAM

ACCOUNT NUMBER:002100547385195001

IFSC:CSBK0000021