GST INVOICE

(DUPLICATE FOR TRANSPORTER)

Praful Sanitary 3-6-429/6,SRI SAI TOWER, St.No.4 HIMAYAT NAGAR HYDERABAD GSTIN/UIN: 36ACWPG4864A1ZG State Name : Telangana, Code : 36 E-Mail : prafulsanitary@gmail.com	Invoice No. **PS/25-26/816**	Dated **20-Dec-25**
	Delivery Note **Invoice**	
	Reference No. & Date.	Other References **Credit**
Buyer (Bill to) **MC Modi Educational Trust** 5-4-187/3&4, IInd Floor, M.G. Road, Secunderabad GSTIN/UIN : 36AAATM5488Q2ZO State Name : Telangana, Code : 36	Buyer's Order No. **20251216002**	Dated **18-Dec-25**
	Dispatch Doc No. **Invoice**	Delivery Note Date **20-Dec-25**
	Dispatched through **Self**	Destination **Manilal Modi Memorial Hospital, Turkapally**

Sl No	Description of Goods and Services	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	**40mm Cpvc 45° Elbow**	3917	**6 No:**	190.00	No:	52 %	**547.20**
	Output CGST						**49.25**
	Output SGST						**49.25**
	ROUNDING OFF						**0.30**
	Total		**6 No:**				**₹ 646.00**

IN
Inward 580 20/12/25
MRN
Received Sign:
Ki Z
MC MODI EDUCATIONAL TRUST

Amount Chargeable (in words)

Indian Rupees Six Hundred Forty Six Only

E. & O.E

HSN/SAC	Taxable Value	CGST Rate	CGST Amount	SGST/UTGST Rate	SGST/UTGST Amount	Total Tax Amount
3917	547.20	9%	49.25	9%	49.25	98.50
9965		9%		9%		
99		14%		14%		
Total	547.20		49.25		49.25	98.50

Tax Amount (in words) : **Indian Rupees Ninety Eight and Fifty paise Only**

Company's PAN : **ACWPG4864A**

Declaration
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Company's Bank Details
Bank Name : **Canara Bank**
A/c No. : **1181201020289**
Branch & IFS Code : **Banjara Hills & CNRB0001181**

Customer's Seal and Signature

for Praful Sanitary

Authorised Signatory

PRAFUL SANITARY Hyderabad-29

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice