

Summary for Magic Industries

Sr. No.	Invoice No	Date	Items	Amount
1	10	08.05.24	Hospital Registers	✓ 27440 ✓
2	17	20.05.24	Diet Register	✓ 4816 ✓
3	16	20.05.24	Discharge Registers	2408 ✓
Total:				34664 ✓

1. Registers for hospital.
2. Process for payment.


29/05/24

CEO

Tax Invoice

(ORIGINAL FOR RECEIPT)

MAGIC INDUSTRIES
 NO. 25/50 Lane No. 11 JAMBHAVANI NAGAR MUKUNDWADI
 RAILWAY STATION ROAD AURANGABAD
 GSTIN/UIN: 27CSMPP9931K1ZU
 State Name: Maharashtra, Code: 27

Invoice No:
MU24-25/10
 Delivery Note

Dated:
8-May-24
 Model/Terms of Payment

Reference No. & Date

Other References

Buyer's Order No:
15
 Dispatch Doc No

Dated:
12-Apr-24
 Delivery Note Date

Dispatched through

Destination

Terms of Delivery

Consignee (Ship to)
SHREEYASH AYURVEDIC HOSPITAL AND RESEARCH CENTER
 GUT NO 25B SATARA PARISAR
 BEED BYPASS RD NEAR SRPF CAMP
 AURANGABAD
 State Name: Maharashtra, Code: 27

Buyer (Bill to)
SHREEYASH AYURVEDIC HOSPITAL AND RESEARCH CENTER
 GUT NO 25B SATARA PARISAR
 BEED BYPASS RD NEAR SRPF CAMP
 AURANGABAD
 State Name: Maharashtra, Code: 27

Sl No	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Amount
1	ATTENDANCE REGISTER 200 PAGE	48025790	12 %	10.00 NOS	215.00	NOS	2,150.00
2	DEPARTMENT OPD REG 300 PAGE	48025790	12 %	50.00 NOS	275.00	NOS	13,750.00
3	STOCK REGISTER 200 PAGE	48025790	12 %	20.00 NOS	215.00	NOS	4,300.00
4	PATHOLOGY REGISTER 200 PAGE	48025790	12 %	20.00 NOS	215.00	NOS	4,300.00
							24,500.00
							1,470.00
							1,470.00

OUTPUT CGST
 OUTPUT SGST

Certified that items as Mentioned
 on this Bill have Been Correctly
 received as per specifications
 Quality and Quantiti

Advance Not Paid

STORE / DEPARTMENT
 Receipt No. 50 Date 8/5/24
 Place for Material Use Ayurvedic College
 Received by Name Yogesh Balkwad Sign [Signature]
 Inspected by Name Sun Sign [Signature]
 Passed by Name D.R. Mohabale Sign [Signature]

Total 100.00 NOS ₹ 27,440.00
 E & O E

Amount Chargeable (in words)
INR Twenty Seven Thousand Four Hundred Forty Only

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

This is a Computer Generated Invoice



Faded header and table content, likely containing item descriptions and prices.

Certified that items as mentioned on this Bill have been correctly received as per specifications Quality and Quantity

Amount not paid

STORE / DEPARTMENT _____ Date _____
Receipt No. 79
Place for Material Neurologic Hospital
Received by Yogesh
Inspected by D.R. Mahabale
Accepted by _____
Name _____

Total 20.00 NOS ₹ 4,816.00

Chargeable (in words) Four Thousand Eight Hundred Sixteen Only

NOTE: I declare that this invoice shows the actual price of the goods described and total all particulars are true and correct.

MAGIC INDUSTRIES

Handwritten notes and text, including the word "MURAN" and "State Name".

DIS... and other faint text at the top of the page.

Handwritten text in a box, possibly a signature or title.

Amount in red ink: 2,000.00

Received by... and other handwritten text in the middle section.

Amount Overdue...
INR Two Thousand Five Hundred Eight Only

Signature and date information at the bottom left.

Barcode and other markings at the bottom right.