8/10

MAHATMA GANDHI MISSION HOSPITAL

Sector-18, Kamothe, Navi Mumbai-410 209

PAYMENT ORDER

No.

Item Repair & Maint. Dept. FMW

Party's name and address Shree Enterprises

Bill No. 405 Date 10/6/19

Approved Quotation No. attach Date 14/5/19

Purchase order No. 25 Date 14/5/19

Delivery Challan No. - Date

G. R. No. 118 Date 10/6/19

Received by Checked by

(Department Incharge) (Purchase Officer)

Goods received are Satisfactory / as per our order.

Bills recommended for payment of Rs. 22,100/- Twenty two thousand one hundred only.

Manager material

Accounts Officer,

Please Pay the bills through cheque.

Medical Suptd.

Amount paid by cheque / cash.

Cheque No. Date

Received above cheque No. of Rs.

Receiver's Signature

SHREE ENTERPRISES

Off. Add.:- A wing 402 krishna mahal chs. Sec.6 plot no. 2, kamothe navi mumbai.410 209
Contact : - 09594518198, / 9076179781

Invoice No. 05

W/O No:- 11

Date :- 10/06/2019

Consignee

The Medical superintendent
MGM Medical College Hospital
Kamothe
Navi mumbai

Sr.	Description of Goods	Qty.	Rate.Per	Amount
	bed side screen 50mm castor change {**FMW** }	1 set	300.00	300.00
1	wheel chair foot pad change	1 set	900.00	900.00
2	wheel chair cycle wheel change	1 set	3000.00	3000.00
4	iv stand 50mm castor change {**CVTS ICU**}	2 set	300.00	600.00
5	wheel chair front wheel change {**MOW** }	1 set	1500.00	1500.00
6	wheel chair front wheel change {**RESP.MED. WARD** }	1 set	1500.00	1500.00
7	wheel chair back rest welding { **OPD** }	1 nos	900.00	900.00
8	stretcher trolley pipe welding	1 nos	900.00	900.00
9	wheel chair front wheel change {**MSW-1** }	1 set	1500.00	1500.00
10	stretcher trolley 150mm castor change {**PEAD.MED.WARD**}	1 set	5000.00	5000.00
11	wheel chair cycle wheel change {**MMW** }	1 set	3000.00	3000.00
12	wheel chair front wheel change	2 set	1500	3000.00
			TOTAL	**22100.00**
			Total Amount	**22100.00**

SHREE ENTERPRISES

SHREE ENTERPRISES KAMOTHE

Authorised Signatory

PAYMENT TO BE MADE BY ACCOUNT PAYEES CHQUE/DO INFAVOUR OF

Terms & Condition

Payment :- 50% Advance & 50% Against Delivery.
Validity :- 15 days
Delivery :- nil
Warranty :- nil

M.G.M. HOSPITAL, KAMOTHE
Following Repaired
S.R. No:- 118
Date:- 10/6/19
Store Incharge:-

w/o #25

Sandeep B.Zunjarrao
Mob.No.09594518198
09076179781

SHREE ENTERPRISES

All types Hospital Beds Equipments,Sales,Repairing. Services

Off:- A Wing 402, Krishna Mahal CHS. Plot. No, 02 Sec. 06, A Kamothe. Navi Mumbai, 401 209.

Service report

Date:-

Name of customer:- M&M Hospital Kamothe

Dept.:- 1} Resp. med Work

2} OPD

3} MSW-1

4}

5}

Nature of problem:- Resp. med. ① wheel chaige front wheel change – 1 set-

OPD - ① wheel chair Back Rest welding – 1 chair
② stretcher Trolley support PIPE welding – 1 Trolley
MSW-1 ① wheel chair front wheel change – 1 set-

Action taken:- all work done.

Remark:-

Sign of customer {dept. incharge }:-

MSW I

OPD

Sign. Of engineer:-

SHREE ENTERPRISES KAMOTHE

w/o #25

Sandeep B.Zunjarrao
Mob.No.09594518198
09076179781

SHREE ENTERPRISES

All types Hospital Beds Equipments,Sales,Repairing. Services

Off:- A Wing 402, Krishna Mahal CHS. Plot. No, 02 Sec. 06, A Kamothe. Navi Mumbai, 401 209.

Service report

Date:-

Name of customer:- MGM Hospital Kamothe.

Dept.:- 1} fmw

2} CVTS ICU

3} MOW

4}

5}

Nature of problem:-

fmw - (1) Bedside screen wheel change - 1 set
(2) Wheel chair foot pad change - 1 set
(3) Wheel chair cycle wheel change - 1 set

CVTS ICU (1) Iv stand wheel change - 2 Set

MOW (1) wheel chair front wheel change - 1 set

Action taken:- all work done.

Remark:-

Rajesh
fmw

MOW

CSMD
8/6/14

Sign of customer {dept. incharge }:-

Sign. Of engineer:-

SHREE ENTERPRISES

w/o # 25

Sandeep B.Zunjarrao
Mob.No.09594518198
09076179781

SHREE ENTERPRISES

All types Hospital Beds Equipments,Sales,Repairing. Services

Off:- A Wing 402, Krishna Mahal CHS. Plot. No, 02 Sec. 06, A Kamothe. Navi Mumbai, 401 209.

Service report

Date:-

Name of customer:- MGM Hospital Kamothe

Dept.:- 1} Pead. med. wd.

2} MMW

3}

4}

5}

Nature of problem:- Pead. Med. wd (1) Stretcher Trolley
Isoman cots for change – 1 set.

MMW – (1) wheel chair cycle wheel change - 1 set
(2) wheel chair foont wheel change - 2 set

Action taken:- all work done.

Remark:-

Sign of customer {dept. incharge }:-
MMW. Jossy Stephen.
Beds award

Sign. Of engineer:-

SHREE ENTERPRISES KAMOTHE

7/10

MAHATMA GANDHI MISSION HOSPITAL

Sector-18, Kamothe, Navi Mumbai-410 209

PAYMENT ORDER

No.

Item Repair & Medical Dept. MOW, ENT, EM. Med. Special Surgical

Party's name and address Shree Enterprises

Bill No. 07 Date 10/6/19

Approved Quotation No. attach Date 17/4/19

Purchase order No. 11 Date 19/4/19

Delivery Challan No. - Date

G. R. No. 119 Date 10/6/19

Received by Checked by

(Department Incharge) (Purchase Officer)

Goods received are Satisfactory / as per our order.

Bills recommended for payment of Rs. 9,500/- Nine thousand five hundred only.

Manager material

Accounts Officer,

Please Pay the bills through cheque.

Medical Suptd.

Amount paid by cheque / cash.

Cheque No. Date

Received above cheque No. of Rs.

Receiver's Signature

SHREE ENTERPRISES

Off. Add.:- A wing 402 krishna mahal chs. Sec.6 plot no. 2, kamothe navi mumbai.410 209
Contact : - 09594518198, / 9076179781

Invoice No. 07

W/O No:- 11

Date :- 10/06/2019

Consignee
The Medical superintendent
MGM Medical College Hospital
Kamothe
Navi mumbai

Sr.	Description of Goods	Qty.	Rate.Per	Amount
1	wheel chair foot rest welding { MOW }	1 set	900.00	900.00
2	iv stand wheel 50mm change { ENT }	5 nos	50.00	250.00
3	casuality trolley top sheet change {EM. MED WARD}	1 set	5000.00	5000.00
4	icu bed 125 mm castor change {SPECIAL WARD }	1 set	4000.00	4000.00
5	fowler bed servicing	1 nos	600.00	600.00
			TOTAL	10750.00
			DIST.	1250.00
			Total Amount	9500.00

SHREE ENTERPRISES

SHREE ENTERPRISES

Authorised Signatory

PAYMENT TO BE MADE BY ACCOUNT PAYEES CHQUE/DO INFAVOUR OF

Terms & Condition

Payment :- 50% Advance & 50% Against Delivery.
Validity :- 15 days
Delivery :- nil
Warranty :- nil

M.G.M. HOSPITAL, KAMOTHE
Following Repaired
S R No:- 119
Date:- 10/6/19
Store Incharge

w/o -11

Sandeep B.Zunjarrao
Mob.No.09594518198
09076179781

SHREE ENTERPRISES

All types Hospital Beds Equipments,Sales,Repairing. Services

Off:- A Wing 402, Krishna Mahal CHS. Plot. No, 02 Sec. 06, A Kamothe. Navi Mumbai, 401 209.

Service report

Date:-

Name of customer:- MGM Hospital Kamothe

Dept.:- 1} Em. med. (Casuality)

2} MOW

3} ENT

4} special ward.

5} (Casuality)

Nature of problem:-

(MOW) 1) Casuality Trolley Top change - 1set.
2) Wheel chair foot Rest welding - 1set
(ENT) 3) IV stand wheel change - 1set
(special) 4) Bed castor 125mm change - 1set
5) fowler Bed Total servicing - 1 Bed.

Action taken:- all ward work done.

Remark:-

Naithili WTI: Special WD.
Rokas OP ENT HD
MOW
16/1/19 Casuality Work done

Sign of customer {dept. incharge }:-

Sign. Of engineer:-

SHREE ENTERPRISES

MGM MEDICAL COLLEGE HOSPITAL, KAMOTHE

Plot No.1 & 2, Sector-1, Kamothe, Navi Mumbai - 410 209 Tel.: 27437925/7692, 27437900

WORK ORDER

To,
Shree Enterprises
A Wing - 402, Krishna Mahal Chs.
Plot No.02, Sector-06,
Kamothe, Navi Mumbai – 401 209

W.O. No. 11

Date: 19.04.2019

Sir,

Sub.: Repairing of Hospital Furniture.
Ref.: Your Quotation No. Nil dated: 17.04.2019.

Sr. No.	Items	Qty	Rate (Rs)	Total (Rs)
	MOW			
1	Wheel Chair – Foot rest welding	01 No	900.00	900.00
	ENT			
2	IV Stand – Wheel replace	05 No	50.00	250.00
	Em. Med.			
3	Crash Cart Trolley – Drawer replace	01 Set	4,500.00	4,500.00
4	Casualty Trolley – Top sheet replace	01 Set	5,000.00	5,000.00
	Special Ward			
5	ICU Bed – 125mm castor replace with brake	01 Set	4,000.00	4,000.00
6	Fowler Bed – Total serving	01 No	600.00	600.00
	Total			**15,250.00**
	Less Discount			1,250.00
	Grand Total			**14,000.00**

Medical Superintendent
MGM Hospital, Kamothe

7/10

MAHATMA GANDHI MISSION HOSPITAL

Sector-18, Kamothe, Navi Mumbai-410 209

PAYMENT ORDER

No.

Item Repair & Maint. Dept. Em. Med, MICU, CCU

Party's name and address Shree Enterprises

Bill No. 08 Date 10/6/19

Approved Quotation No. attach Date 5/4/19

Purchase order No. 10 Date 18/4/19

Delivery Challan No. - Date

G. R. No. 128 Date 20/6/19

Received by Checked by

(Department Incharge) (Purchase Officer)

Goods received are Satisfactory / as per our order.

Bills recommended for payment of Rs. 12,500/- Twelve thousand five hundred only.

Manager material

Accounts Officer,

Please Pay the bills through cheque.

Medical Suptd.

Amount paid by cheque / cash.

Cheque No. Date

Received above cheque No. of Rs.

Receiver's Signature

SHREE ENTERPRISES

Off. Add.:- A wing 402 krishna mahal chs. Sec.6 plot no. 2, kamothe navi mumbai.410 209
Contact : - 09594518198, / 9076179781

Invoice No. 08

W/O No:- 10

Date 10/06/2019

Consignee

The Medical superintendent
MGM Medical College Hospital
Kamothe
Navi mumbai

Sr.	Description of Goods	Qty.	Rate.Per	Amount
1	bed side locker leg change {**EM. MED. CASUA.**}	3 nos	600.00	1800.00
2	ventilator 100mm PU body casstor change	1 set	3000.00	3000.00
3	casuality trolley			
	pipe 50X25X100mm change	2 nos	600.00	1200.00
	welding	2 nos	900.00	1800.00
4	bed side screen 50mm castor change	6 nos	50.00	300.00
	cutting	4 nos	50.00	200.00
5	ICCU BED total servicing {**SICU/MICU** }	5 beds	1000.00	5000.00
6	ICCU bed railing servicing {**CCU**}	1 set	300.00	300.00
			TOTAL	**13600.00**
			DIST.	**1100.00**
			Total Amount	**12500.00**

SHREE ENTERPRISES

Authorised Signatory

PAYMENT TO BE MADE BY ACCOUNT PAYEES CHQUE/DO INFAVOUR OF

Terms & Condition

Payment :- 50% Advance & 50% Against Delivery.
Validity :- 15 days
Delivery :- nil
Warranty :- nil

M.G.M. HOSPITAL, KAMOTHE
F Wing Repaired
S.R. No:- 120
Date:- 10/6/19
Store Incharge:-

w/o - 10

Sandeep B.Zunjarrao
Mob.No.09594518198
09076179781

SHREE ENTERPRISES

All types Hospital Beds Equipments,Sales,Repairing. Services

Off:- A Wing 402, Krishna Mahal CHS. Plot. No, 02 Sec. 06, A Kamothe. Navi Mumbai, 401 209.

Service report

Date:-

Name of customer:- MGM Hospital Kamothe

Dept.:- 1} Em. med. (casuality)

2} SICU/MICU

3}

4}

5}

Nature of problem:-

(Em.med) 1) Bedside Locker + screen wheel change - 6 Nos
2) casuality Trolley Repair - 2 Nos.
3) Ventilator castor change - 1 set.

(SICU/MICU) 1) ICCU Mach. Bed Total servicing - 5 Bed.

(CCU) 1) ICU Bed Railing Servicing - 2 Nos.

Action taken:- all work done.

Casuality
7/6/19
Work done

Remark:-

ES Pwd 7/6/18.

Sign of customer {dept. incharge }:- Work done MCW - PShinde

Sign. Of engineer:-

SHREE ENTERPRISES

4/4

MAHATMA GANDHI MISSION HOSPITAL

Sector-18, Kamothe, Navi Mumbai-410 209

PAYMENT ORDER

No.

Item Wheel Chair Dept. MOW

Party's name and address Midmarke (India) Private Limited

Bill No. JH/18-19/5559 Date 20/2/19

Approved Quotation No. attached Date

Purchase order No. 0166 Date 28/1/19

Delivery Challan No. JH/18-19/5559 Date 20/2/19

G. R. No. 1860 Date 21/2/19

Received by Checked by

(Department Incharge) (Purchase Officer)

Goods received are Satisfactory / as per our order.

P.O. Amt. 50% ad. Bal. Pay.

Bills recommended for payment of Rs. 17,935/- - 8,967.50/- = 8,967.50/-

Eight thousand nine hundred sixty seven and fifty paisa only.

Manager material

Accounts Officer,

Please Pay the bills through cheque.

Medical Suptd.

Amount paid by cheque / cash.

Cheque No. Date

Received above cheque No. of Rs.

Receiver's Signature

MIDMARK (INDIA) PRIVATE LIMITED

Formerly "JANAK HEALTHCARE PRIVATE LIMITED"

MIDMARK
JANAK

Delivery Challan

Challan No: JH/18-19/5559 | **Date:** 20-02-2019

Consignee:
MGM Medical College Hospital

Plot No.1 & 2,Sector-18, Kamothe
Navi Mumbai
Maharashtra 410209

PO No: 166
PO Date: 28-01-2019

Order No:	3110000342
Order Date:	12-02-2019
Mode of Transport:	Road
Transporter:	Amit Transport
LR No:	5970
LR Date:	20-02-2019
Vehicle No:	GJ 15 XX 5243
Drivers Phone No.	7387326115
Transporter Phone	9377007299
Vehicle Seal No	16101 to 16110

Sr	Item Code	Description	Qty	# of Pakgs	Pack Unit
1	M080211	Invalid Wheel Chair fitted with two swivel castors, 200mm dia in front with pre-treated and powder coated M.S. body frame, with cushioned seat & back Overall approx. size(1033A) Patient Safty belt for Wheel Chair (0120)	1	1	CARTON

Total Quantity : 1

Total Packages : 1

Additional Information :

We acknowledge the receipt of the above in good other and as specified by us

21/2/19

Receiver's Signature

Prepared by

PS. No. 87
SR. No. 1860
Date : 21/2/19
Signature

MIDMARK (INDIA) PRIVATE LIMITED
Formerly "JANAK HEALTHCARE PRIVATE LIMITED"
CIN No. U36100MH1999PTC122868
Corporate Office:Art Guild House, "A" Wing, Unit No. 15 & 16, Lower Ground Floor, Phoenix Market City, LBS Road, Kurla (West), Mumbai-400 070. India Tel : +91 22 4915 3000 Fax : +91 22 4915 3100 E-mail : india@midmark.com Website : www.midmark.in

Registered Office : Janak House, Opp. Indian Oil Corp. Depot, Sheikh Misry Road, Wadala (E), Mumbai - 400 037, India.
Tel.: +91 22 2412 0171 / 2413 0407 | Fax: +91 22 2413 9870 | Email : india@midmark.com
Factory : A - 1/3, G.I.D.C. Estate, Umbergaon - 396 171, Dist. Valsad, Gujarat. Tel.: +91 260 2562 406 | Fax: +91 260 256 2706

Asia's Fastest Growing HEALTHCARE BRANDS

ORIGINAL FOR RECIPIENT

TAX / RETAIL INVOICE

(Rule 46 of GST 2017)

INVOICE UNDER GST FOR SUPPLY OF TAXABLE GOODS
Range : VII, Division : XII (Umbergaon).
Commissionerate :Surat
GST No : 24AACCM0219N1ZM
Description Of Taxable Goods : Hospital Steel Furniture
Pan No.: AACCM0219N

MIDMARK (INDIA) PRIVATE LIMITED

A-1/3, G.I.D.C. Industrial Estate,
Umbergaon - 396 171, (Gujarat)
Telephone : (0260) 2562406, 2563516.
Email : india@midmark.com
Web : www.midmark.in
CIN No. U36100MH1999PTC122868.

MIDMARK JANAK

ISO 9001:2015 ISO 14001:2015 BUREAU VERITAS Certification — UKAS MANAGEMENT SYSTEMS 0008 — OHSAS 18001:2007 BUREAU VERITAS Certification

Invoice : JH/18-19/5559	Date : 20-02-2019
MGM Medical College Hospital Plot No.1 & 2,Sector-18, Kamothe Navi Mumbai Maharashtra 410209 PO No. 166 PO Date. 28-jan-2019	Order Number 3110000342 Transporter Amit Transport LR No. 5970 LR Date 20-02-2019 Vehicle No. GJ 15 XX 5243 Mode of Transport Road Delivery Number 57455

Sr.	Item Code	Description	HSN Code	Qty	Rate	Freight	Taxable Total	CGST	SGST	IGST	Amount
1	M080211	Invalid Wheel Chair fitted with two swivel castors, 200mm dia in front with pre-treated and powder coated M.S. body frame, with cushioned seat & back Overall approx. size(1033A) Patient Safty belt for Wheel Chair (0120)	87131010	1	15,815.69	8% 1265.25	17080.94	0 0.00	0 0.00	5% 854.05	17934.99

GST No:

Date & Time of invoice 20-02-2019 17:36 Hrs

Date & Time of Removable of goods 20-02-2019 18:30 Hrs

Net Total	INR	15815.69
Freight Total	INR	1265.25
Taxable Total	INR	
CGST Total	INR	0.00
SGST Total	INR	0.00
IGST Total	INR	854.05
Grand Total	INR	17934.99
Rounded Total	INR	17935.00

Total Amount in Words : INR.Seventeen Thousand Nine Hundred Thirty-Five Only

Additional Information :

Copy Rec
13/3/19

JANAK HEALTHCARE PVT. LTD.

JANAK
A MIDMARK COMPANY

TECHNICIAN'S REPORT CUM WORK COMPLETION CERTIFICATE	Report No:	
	Date:	23/06/16
SO/WO/20/S 2016	Region:	Konkan
Delivery Challan no: —		
Customer Name & Address: Navi Mumbai MGM Hospital Kamothe Kamothe	Service At:	Navi Mumbai
	Call From:	Distributor / Customer
	Call Received: Date:	23/06/16
	Call Attained: Date:	23/06/16
	Time IN:	12.55pm
	Time OUT:	3.15pm
Contact Person: Manjrat Store	Call Type:	Installation / Chargeable / Non Chargeable
Phone No: 8693833733		Warranty / CMC / AMC / Call Basis / Survey
E-Mail ID: —		

Product Description: 1710 ER Trolley / Wheel Chair

Nature of Complaint: OBK ER Trolley - 4 Nos. all Wheels Welding in Main Gas spring 1 nos. hydro pump not working properly.

Details of Action Taken: Wheel Chair 1 Nos Not Repairable. Base frame - 4 Nos. all Main frame - 1 Nos with Handle and 4 Set 3" & Shinco castor, 8 mm Gas Spring 8 Nos.

Status on the Call: Completed: Yes / No

Pending (Reason)

Parts Description	Qty	Replaced	Requirement	Reason
Hydraulic pump	01		✓	
Handle	01		✓	
Nylon bush	02		✓	

Clients Comments

Gopal Mandal 23/06/2016
Name of Technician & Signature

Customer's Approval: The above said products are repaired / installed a work done as per our satisfaction.

Customer Name - Signature & Seal with Date 23/6/16

For Office Use Only

Corporate Office : Kalpataru Point, Unit No. 12, 1st Floor, Opp. Cinemax Theatre, Sion (E), Mumbai - 400 022, India. Tel.: +91 22 4915 3000, Fax : +91 22 4915 3
Registered Office : Janak House, Opp. Indian Corpn. Depot, Sheikh Mistry Road, Wadala (E), Mumbai - 400 037. India. Tel.: +91 22 24120171 / 2413 0407, Fax : +91 22
Factory : A-1/3, G.I.D.C Estate, Umbergaon - 396 171. Dist. Valsad, Gujarat. Tel : 91 260 2562406, Fax : +91 260 2562706
Toll Free No. : 1800 22 8020 Email : technicalsupport@janakhealthcare.com
CIN - U36100MH1999PTC122868 www.janakhealthcare.com

Customer Copy

MIDMARK (INDIA) PRIVATE LIMITED

Formerly "JANAK HEALTHCARE PRIVATE LIMITED"

No.: MIPL/MH08/DPS/2016/87 Date: 4/10/2016

To,
MGM Hospital,
Kamothe, Navi Mumbai

Sub: Proforma Invoice

Kind Attention: Mr Jogdand
Tel : 8424033445
Dear Sir/ Madam,
This refers to the disscussion we had accordingly we enclose our Discount offer.

SR. NO.	PROD CODE	DESCRIPTION	Qty	UNIT RATE (RS.)	Dis (Rs.)
1	1033A + 0158A + 0120	Wheel Chair - Cushioned Seat & back with Safety Belts & Moulded Chart Holder	1	20,380.00	17,934.40

Notes: Rates mentioned above are Inclusive of Excise duty (6%)
Wheel Chair doesn't attract CST (5%)
50% Advance along with Purchase Order & balance 50% against delivery.
Octroi/LBT/ NMMC Tax will be at actual, if any to your accounts.
Delivery Period is 4 to 6 weeks.
Validity -30 Days

For Janak Healthcare Pvt. Ltd.

Dhirendra Sharma
Sr. Sales Executive
Mob: +91 9920903552 | Email: dhirendra@janakhealthcare.com

MIDMARK (INDIA) PRIVATE LIMITED

Formerly "JANAK HEALTHCARE PRIVATE LIMITED"

GENERAL TERMS & CONDITIONS OF SALES

1. **PRICES:**
   - A. Offered prices are inclusive of any applicable excise duty, CST/VAT
   - A. Offered prices are on the basis of FOR DESTINATION
   - B. Offered prices include packing, freight by road transport, unloading and installation and exclude any local entry tax like Octroi, Cess etc. which will be customer's scope
   - C. In an event of implementation of any new duties and levies by Government or any change in the statutory levies during the tenure of the contract or in the forthcoming budget, the same shall be applicable to this offer which will be in customer's scope
   - D. Material will be unloaded at the designated place at the time of delivery. Any relocation after the delivery will be in customer's scope.

2. **PAYMENT:**
   50% advance along with the PO and balance against delivery.

3. **DELIVERY:**
   Delivery within 4 to 6 weeks from the date of receipt of PO along with advance payment and if applicable, confirmation of Formica / Membrane colour.

4. **WARRANTY:**
   - A. The products are warranted free from any manufacturing defects for a period of 13 months from the date of delivery or 12 months from the date of installation, whichever lapses earlier. If products are uninstalled beyond 30 days from the date of delivery, warranty stands proportionately reduced.
   - B. Warranty excludes mattresses, mattress covers, foams, any kind of upholstery, PVC laminated panel, batteries wear and tear and damages due to misuse, mishandling, misplacement, of the products/ accessories/ spares/components and operating beyond the stated conditions and tolerances in the user's manual/ product catalogue.

5. **PRICE VALIDITY:**
   30 days from the date of this offer.

6. **ACCEPTANCE:**
   Purchase Order is subject to confirmation of acceptance from Midmark.

7. **CANCELLATIONS:**
   - A. Purchase Order once accepted by Janak is subject to change or cancellation only with a mutual consensus between Midmark and the customer.
   - B. Cancellation charges: 5% order value plus applicable tax and if material is dispatched, freight charges

8. **TITLE:**
   Title to the goods will be transferred to the customer after all sums due as per the Purchase Order have been paid.

BM COMPUTERS

bm Computers

SHOP NO. 30, PRABHAT CENTRE, SECTOR -1A. C.B.D, BELAPUR,
NAVI MUMBAI - 400614, TEL.:27573003, Email: sales@bmcomputers.in/ www.bmcomputers.in

AUTHORISED DEALERS

GST NO : 27AKJPM0627Q1ZN

PAN NO: AKJPM0627Q

DELL, COMPAQ, HP, IBM -LENOVO, ACER. EPSON,IBALL, TALLY

Invoice.No/280-18 Date: 23/10/2018

Tax Invoice

To
MGM Institute Of Health Science,
Plot No.1 & 2, Sector-1,
Nh-4 Junction , Mumbai Pune Hwy,kamothe Navi Mumbai - 410209, Maharashtra, Ind

Sr. No.	Configuration	Qty	Rate	Amount
1.	NVDA 2018.4.1 SOFTWARE	1 No.	10500/--	10500/-
2.	License Charges For supporting Technical And Commercial Assistance In Order To Fill Up Necessary Various Application Form, Making Proper submitting Documentation& Follow-Up With Concern Department, In Order.	1 No.	800/-	800/-
3.	For update versions year of 2019-20	1 No.	1150/-	1150/-
Total				12450/-
			CGST 9%	1121/-
			SGST 9%	1121/-
Grand Total (Fourteen Thousand Six hundred Ninty two Rupees)				14692/-

Binu Mathew

Proprietor