**INVOICE**

|  |  |  |
| --- | --- | --- |
| **MATRIX SERVICE PROVIDERS (15-16) - (From 1-Apr-2016)**56, METCALFE STREETUNIT - 1C, 1ST FLOORKOLKATA-700013E-Mail : info@matrixserviceproviders.com | Invoice No. | Dated |
| Delivery Note | Mode/Terms of Payment |
| Supplier's Ref. | Other Reference(s) |
| Buyer's Order No. | Dated |
| Despatched through | Destination |
| Buyer |
| Terms of Delivery | Destination |
| Terms of Delivery |
| SlNo. | Description of Goods | Quantity | Rate | per | Amount |
|  |  |  |  |  |  |
|  | Total |  |  |  |  |
|

|  |
| --- |
| **for MATRIX SERVICE PROVIDERS (15-16) - (From 1-Apr-2016)**Authorised Signatory |

Amount Chargeable (in words) *E. & O.E* Company's Bank Details Bank Name : **STATE BANK OF INDIA** Declaration A/c No. : **37186715140** We Declare that this invoice shows the actual price of the Branch & IFS Code: **RASOI COURT & SBIN0040259** Goods described and that all particulars are true and correct |