

ACS Care Center

5/6, Kanagambaram, K K Nagar, Peerkankararani, Perungulathur, Chennai, Tamilnadu-600063
Chennai Tamilnadu

GSTIN : 33CPNPS6938F1ZD
SAC Code : 995469

TAX INVOICE

Reverse Charges

Invoice No. 033/2024-25
Invoice Date 10-APR-2025
State Tamilnadu

Transportation Mode

Vehical No.

Date Of Supply MARCH 2025
Place Of Supply Chennai

Detail Of Receiver / Billed to :

Details Of Consignee / Shipped to :

Name :	Panasonic Life Solutions India Pvt.	Name :	Panasonic Life Solutions India Pvt. Ltd.
Address :	123/124-Level 3, Isphani Centre, Nungambakkam High Road, Chennai -600034. Chennai Tamilnadu	Address :	123/124-Level 3, Isphani Centre, Nungambakkam High Road, Chennai -600034. Chennai Tamilnadu
GSTN :	33AAECA2190C1ZA	GSTN :	33AAECA2190C1ZA
State	Tamilnadu	State	Tamilnadu

S No.	Product/Services	HSN/SAC	Taxable Value	SGST/UTGST		CGST		IGST		TOTAL
				Rate	Amount	Rate	Amount	Rate	Amount	
1	Remuneration for services Rendered to Chennai SB	995469	2168	9%	195.12	9%	195.12	0%	0	2558.24
Total :			2168	195.12		195.12		0		2558.24

BANK NAME STATE BANK OF INDIA ACCOUNT NO 67346065162 IFSC CODE SBIN0000987		Bank Details :		Total Amount Before Tax		2168		
				Add : CGST		9%		
				Add : SGST/UTGST		9%		
				Add : IGST		0%		
				Tax Amount : GST		390.24		
				Total Amount After Tax		2558.24		

Term and Conditions :					Certified that the particulars given above are true and correct :		
					ACS Care Center Authorised Signatory Common Seal		

For ACS CARE CENTRE

X
Proprietor

MONTHLY SERVICE REPAIR SUMMARY

FROM :	TO :
ACS Care Center	Chennai SB
5/6, Kanagambaram, K K Nagar, Peerankararani, Chennai Tamilnadu	123/124-Level 3, Isphani Centre, Nungambakkam High Chennai Tamilnadu
GSTN : 33CPNPS6938F1ZD	GST NO. 33AAECA2190C1ZA

Dear Sir,

We are submitting monthly Service Claim for :- 03 / 2025

Reference No.	6280021032025	For Date	06-Apr-2025
Claim Month	3	Center	ACS Care Center
Claim Year	2025	Vendor	2020604

S No.	Particulars	
1	In Warranty calls	15
2	Multiple Calls	0
3	Rejected Calls	2
4	Service Charges	875
5	Upcountry Travel Charges	0
6	Incentive	0
7	Installation	1575
8	Deduction	282
9	Total Claim Payable	2450
Approved Amount		2168

Action Level	Action Date	Action By	Action Status	Remark
1	07-Apr-2025 20:57:46	Udhayakumar	Approved	APPROVED Approved Amount:

Thanking you,

ACS Care Center

Authorised Official (Please Stamp and Sign here.)
 (Please attach Original Invoice and supporting documents with this cover letter)

For ACS CARE CENTRE

 Proprietor