



02011732604535

33AAJCS0953J1Z9

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09-Jun-2025  
CHENNAI TAMPOL (CHTAMPOL)  
VIRUDHUNAGAR TOWN (VNRT)  
TBB (DD)

| CONSIGNOR :                                                                         |                                         |                     |                         | CONSIGNEE :                                                                                                         |              |                   | FREIGHT CHARGES  | AMOUNT                  |                   |                 |        |
|-------------------------------------------------------------------------------------|-----------------------------------------|---------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------|--------------|-------------------|------------------|-------------------------|-------------------|-----------------|--------|
| TAMPCOL-CHENNAI                                                                     |                                         |                     |                         | DR.UMA DEVI AMO H                                                                                                   |              |                   | BASIC FREIGHT    | --                      |                   |                 |        |
| ,TAMCOL FACTORY SIDCO INDL ESTATE ALATHUR THIRUPORUR VIA KANCHIPURAM. 603110-603110 |                                         |                     |                         | 626001 - DR.UMA DEVI AMO H GOVT HEAD QUARTERS HOSPITAL VIRUDHUNAGAR DIST-626001                                     |              |                   | ARTICLE CHARGES  | --                      |                   |                 |        |
|                                                                                     |                                         |                     |                         |                                                                                                                     |              |                   | DOCUMENT CHARGES |                         |                   |                 |        |
| Mobile Number :                                                                     |                                         | 9445110794          |                         | Mobile Number :                                                                                                     |              | 8925577821        |                  | DOOR COLLECTION CHARGES | --                |                 |        |
| Email Id:                                                                           | tampcolfiz@gmail.com                    |                     |                         | Email Id:                                                                                                           | no@gmail.com |                   |                  | DIESEL HIKE CHARGES     | --                |                 |        |
| GOODS DESCRIPTION                                                                   |                                         | SAID TO CONTAIN     |                         | NO. Of ARTICLE                                                                                                      |              | CHARGED WT.       | ACTUAL WT.       |                         | FREIGHT SURCHARGE |                 |        |
| CARTON BOX                                                                          |                                         | HARM LESS MEDICINES |                         | 2                                                                                                                   |              | 25.0              | 20.0             |                         | VALUE SURCHARGE   |                 |        |
|                                                                                     |                                         |                     |                         |                                                                                                                     |              |                   |                  |                         |                   |                 |        |
| INVOICE NO.                                                                         | 493                                     | VALUE               | 3570.00                 | Cus. Spec. Inst : Est. Del. Date : 11-Jun-2025(Booked within cut off time), Delivery Branch Contact No.: 9150112229 |              |                   |                  | OTHER CHARGES           | --                |                 |        |
| E-Waybill No                                                                        |                                         |                     |                         |                                                                                                                     |              |                   |                  |                         |                   | DOOR COLLECTION | --     |
|                                                                                     |                                         |                     |                         |                                                                                                                     |              |                   |                  |                         |                   | DOOR DELIVERY   | 100.00 |
|                                                                                     |                                         |                     |                         |                                                                                                                     |              |                   |                  |                         |                   | DISCOUNT        | -0.00  |
| Seal Required Invoice :                                                             |                                         | NO                  | Sign Required Invoice : | NO                                                                                                                  | REMARKS:     |                   |                  |                         | TOTAL FREIGHT     |                 |        |
| Customer LR Copy Required :                                                         |                                         |                     |                         | ODA Location :                                                                                                      |              |                   |                  | GST (SGST 9% + CGST 9%) | --                |                 |        |
| Regd. Off. : No:32 H Block 15th Main Road, Anna Nagar, Chennai, Tamil Nadu, 600040  |                                         |                     |                         | ODA Km :                                                                                                            |              | 0.00              |                  | GRAND TOTAL             | --                |                 |        |
| BOOKING OFFICE :                                                                    | NO. 417, PANTHEON ROAD, EGMORE, CHENNAI |                     |                         | DELIVERY TYPE :                                                                                                     |              | NORMAL            |                  | Rupees : --             |                   |                 |        |
| Barcode No                                                                          |                                         |                     |                         | PLACE OF DELIVERY :                                                                                                 |              | VIRUDHUNAGAR TOWN |                  |                         |                   |                 |        |
|                                                                                     |                                         |                     |                         |                                                                                                                     |              |                   |                  |                         |                   |                 |        |



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|-------------------------------------------------------------------------------------|-----------------------------------------|-------------------------|---------|---------------------------------------------------------------------------------------------------------------------|-------------------|-------------|------------------|-------------------------|-------------------|
| TAMPCOL-CHENNAI                                                                     |                                         |                         |         | DR.UMA DEVI AMO H                                                                                                   |                   |             | BASIC FREIGHT    | --                      |                   |
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| CARTON BOX                                                                          |                                         | HARM LESS MEDICINES     |         | 2                                                                                                                   |                   | 25.0        | 20.0             |                         | VALUE SURCHARGE   |
|                                                                                     |                                         |                         |         |                                                                                                                     |                   |             |                  |                         |                   |
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| E-Waybill No                                                                        |                                         |                         |         |                                                                                                                     |                   |             | DOOR COLLECTION  | --                      |                   |
|                                                                                     |                                         |                         |         |                                                                                                                     |                   |             | DOOR DELIVERY    | 100.00                  |                   |
|                                                                                     |                                         |                         |         |                                                                                                                     |                   |             | DISCOUNT         | --                      |                   |
| Seal Required Invoice :                                                             | NO                                      | Sign Required Invoice : | NO      | REMARKS:                                                                                                            |                   |             |                  | TOTAL FREIGHT           | --                |
| Customer LR Copy Required :                                                         |                                         |                         |         | ODA Location :                                                                                                      |                   |             |                  | GST (SGST 6% + CGST 6%) | --                |
| Regd. Off. : No:32 H Block 15th Main Road, Anna Nagar, Chennai, Tamil Nadu, 600040  |                                         |                         |         | ODA Km :                                                                                                            | 0.00              |             |                  | GRAND TOTAL             | --                |
| BOOKING OFFICE :                                                                    | NO. 417, PANTHEON ROAD, EGMORE, CHENNAI |                         |         | DELIVERY TYPE :                                                                                                     | NORMAL            |             |                  | Rupees: --              |                   |
| Barcode No                                                                          |                                         |                         |         | PLACE OF DELIVERY :                                                                                                 | VIRUDHUNAGAR TOWN |             |                  |                         |                   |
|                                                                                     |                                         |                         |         |                                                                                                                     |                   |             |                  |                         |                   |



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| CARTON BOX                                                                          |                      | HARM LESS MEDICINES                     |                         | 2                                                                                                                   |                | 25.0        |  | 20.0                    |               | VALUE SURCHARGE   |    |                 |  |        |  |
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| E-Waybill No                                                                        |                      |                                         |                         |                                                                                                                     |                |             |  | REMARKS:                |               |                   |    | DOOR COLLECTION |  | --     |  |
|                                                                                     |                      |                                         |                         |                                                                                                                     |                |             |  |                         |               |                   |    | DOOR DELIVERY   |  | 100.00 |  |
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| BOOKING OFFICE :                                                                    |                      | NO. 417, PANTHEON ROAD, EGMORE, CHENNAI |                         | PLACE OF DELIVERY :                                                                                                 |                |             |  | Rupees: --              |               |                   |    |                 |  |        |  |
| Barcode No                                                                          |                      |                                         |                         |                                                                                                                     |                |             |  |                         |               |                   |    |                 |  |        |  |