

RAIL WHEEL FACTORY

(INDIAN RAILWAYS)

STOCK ITEMS

S-2817

BILL FORM FOR CLAIMING PAYMENT

(BILL FORM TO BE USED ONLY FOR PURCHASE ORDER NO. IN SERIES 10,000, 13,000, 30,000 AND 33,000 ONLY)

(PORTION TO BE FILLED UP BY SUPPLIER)

Stores Bill No..... Date

Purchase Order No..... Date

SUPPLIER'S BILL FOR STORES PURCHASED

FA & CAO/R.W.F.

To.
Mr/Messrs (SUPPLIER'S NAME) _____

SUPPLIER'S CODE NO. _____

ADDRESS _____

CONSIGNED/DELIVERED TO

RECEIPT NOTE NO. & DATE

P.L. No as per P.O.	Quantity (Unit)	Rate (Rs.)	Amount (Rs.)
Total (Rs.)			

PRE-RECEIPT ACKNOWLEDGEMENT

Received Rs. _____ (Rupees _____)

SALES TAX CERTIFICATE

Certified that Sales Tax as claimed in this bill is legally payable by us to the Sales Tax Authorities. Our Sales

Tax Registration No. is _____

Signature of the supplier

OFFICE STAMP

DATE

Please affix
Re.1/-
Revenue
Stamp
here

Signature of the supplier