

Supplier Name / Company

Address Line 1
Address Line 2
State, PIN Code
GSTIN:
Contact:

TAX INVOICE

Invoice No.:
Invoice Date:
Place of Supply:

Bill To

Customer Name
Address Line 1
Address Line 2
State, PIN Code
GSTIN:

Ship To

Name / Company
Address Line 1
Address Line 2
State, PIN Code

Sr. No.	Description of Goods/Services	HSN/SAC	Qty	Unit	Rate	Amount	Taxable Value	CGST %	CGST Amt	SGST/UTGST %	SGST/UTGST Amt	IGST %	IGST Amt	Tota
Total														

Gross Value		Tax Amount		Invoice Total (INR)	
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Amount in Words:

Bank Details:

Bank Name:
Account Number:
IFSC:
Branch:

Authorized Signatory

Declaration: Certified that the particulars given above are true and correct.
This is a computer-generated invoice.