

**KPSS SALES AGENCY**

SAMPLE INVOICE Address Line 2 City State Pin Phone.:Phone 1

State: State Code: 24

Original

GSTIN No.: GSTIN NUMBER

PAN. No.: IT Numb.

**Bill of Supply**

Billed & Suppled To...

Debit Memo No.: SLRD000001 Dt.:01.07.17

Name : **.General (Cash) Customer**

Transp.:

L.R.No.:

Dt.:

Cases:

City:

PAN No:

Place of Supply:

State:

Code:

GSTIN.:

Reverse Charge: No

Sr	Description	HSN	Qty.	Rate	STD Disc.	Taxable	Total
1	999 POUCH 100GM		10	20.00		200.00	200.00
2	AGARBATTI 40Rs.		20	33.00		660.00	660.00
3	VARIYARI		20	30.00		607.50	607.50
			50			1467.50	1467.50

Note: RND OFF 0.50

TOTAL 1468.00

For, KPSS SALES AGENCY

Bank Dtl.:Bank Detail 1

E. & O.E. Subject to Local City Jurisdiction

Your A/c Bal. as on : 01.07.17 is Rs. 1468.00