

Template: CAge\_GST

Address Line 1  
 Address Line 2  
 City  
 Phone: Pnone 1, Phone 2  
 GSTIN NUMBER



Date : 31/12/2017  
 Bill No.: SLTD000001  
 Party. Customer - 1  
 Address.  
 GST NO.

S.No	HSN CODE	DESCRIPTION	MRP	Quantity	Rate	Sch dis.	Net Rate	CGST%	SGST%	AMOUNT
1	22323	KRACKJACK 75GM 11111/5	6.00	5 PKT	4.76		4.74	6.0	1.42	26.53
2	56565	MILK SHAKTI 100GM 22222/5		5 PKT	3.96		3.94	6.0	1.18	22.06

\*\* VAT SUMMARY \*\*

Txable Amt	CGST%	CGST.Amt.	SGST%	SGST.Amt.	Tot.Amt.	Gross Amt	Scheme Discount	Cash Discount	Total Tax Amt	R/Off:
43.39	6.00	2.60	6.00	2.60	48.59	43.61		0.22	5.20	0.41
43.39 TOTAL		2.60 TOTAL		2.60	48.59	Grand Total :			49.00	

FortyNine only  
 Invoice/General Note 1  
 Invoice/General Note 2

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 Authorised signatory