Bill of Supply

Original

GSTIN No.: GSTIN NUMBER

PAN No.: IT Numb.

Invoice No.: SLRD000001 **Debit Memo**
Invoice Dt.: 06/01/2018
Ord.Ord.No.: Dt.:
Challan No.: Dt.:
Broker Name:
Transport : .

Vehical No..:
Container No:
Seal No.....:

State .....: State
State Code..: 24

Billed To..
Name....: **.General (Cash) Customer**
Adress..:

City....:
State...: Code:
GSTIN No:
PAN No..: Phone:

Shipped to..
Name....: **.General (Cash) Customer**
Adress..:

City....:
State...: Code:
GSTIN No:
PAN No..: Phone:

Sr.	Description	HSN	Qty.	Unit	Rate	Disc.	Total
1	KISMI 400GM 644646		10.000	POUCH	24.04		240.38
			10.000				240.38

L.R.No.: Dt: Cases:

Rupees: Two Hundreds Forty only

Note:

Bank Details: Bank Detail 1
Bank Detail 2

R/Off: -0.38

TOTAL
240.00

E.& O.E.

* Composite Taxable Person, not eligible to collect tax on supplies.

Terms & Condition

Invoice/General Note 1
Invoice/General Note 2
Invoice/General Nore 3

Certified that the particulars given above are true and correct.

For, Template: CAge_GST

Authorised Signatory