

GSTIN No.: GSTIN NUMBER

Pan No...: IT Numb.

**TAX INVOICE**

Debit Memo

Original

<b>Billed To..</b> Name.....: <b>Customer - 1</b> Adress...:  City.....: JUNAGADH State....: Gujarat                      Code: 24 <b>GSTIN No.:</b> PAN No...:                              PHONE: 9288349223						Invoice No.....: SLTD000001 Invoice Dt.....: 31/12/2017 Dt./Time of Supply: 31/12/2020,11:02 am Place of Supply : <b>Transport: .</b> <b>L.R.No...:</b> <b>Cases....:</b> <b>Veh. No...:</b> Reverse Charge [Y/N]: No				
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Sr.	Description	HSN	Qty.	Unit	Rate	Disc%	CGST%	SGST%	Net Rate	Total
1	MILK SHAKTI 100GM	56565	5.000	PKT	3.96		6.00	6.00	4.44	22.18
2	KRACKJACK 75GM	22323	5.000	PKT	4.76	5.00	6.00	6.00	5.07	25.33
			10.000						9.50	47.51

Txable Amt	CGST%	CGST.Amt.	SGST%	SGST.Amt.	Tot.Amt.	Disc.Amt:	1.19	E.& O.E.	R/Off:	0.49
42.41	6.00	2.55	6.00	2.55	47.51					
42.41	TOTAL	2.55	TOTAL	2.55	47.51				<b>TOTAL</b>	<b>48.00</b>

Rs.: FortyEight only

Bank Details: Bank Detail 1  
 Bank Detail 2

Terms & Condition                              Certified that the particulars given above are true and correct.  
 Invoice/General Note 1                              **For, Template: CAge\_GST**  
 Invoice/General Note 2  
 Invoice/General Nore 3  
  
Authorised Signatory