

GSTIN No.: GSTIN NUMBER

Pan No...: IT Numb.

**TAX INVOICE**

Debit Memo

Original

<b>Billed To..</b> Name.....: <b>.General (Cash) Customer</b> Adress...:  City.....: State.....: Code: <b>GSTIN No.:</b> PAN No...: PHONE:						Invoice No.....: SLTDI00001 Invoice Dt.....: 06/01/2018 Dt./Time of Supply: 06/01/2021,12:09 pm Place of Supply : <b>Transport: RAJKOT GODAWON</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%	IGST%	IGST AMT	Net Rate	Total
1	KRACKJACK 75GM	22323	5.000	PKT	4.76		12.00	2.86	5.33	26.67
2	MONACO 75GM	55555	10.000	PKT	4.77		12.00	5.72	5.34	53.37
			15.000						10.67	80.04

Txable Amt 71.46 IGST% 12.00 IGST.Amt. 8.58 Tot.Amt. 80.04	Disc.Amt:	E. & O.E.	R/Off:	-0.04
71.46 TOTAL 8.58 80.04			<b>TOTAL</b>	<b>80.00</b>

Rs.: Eighty only

Bank Details: Bank Detail 1  
 Bank Detail 2

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