

Template: CAge_GST

Original

Address Line 1 Address Line 2 City State Pin

Phone: Pnone 1, Phone 2

Drug Lic No.1
Drug Lic No.2

GSTIN No.: GSTIN NUMBER
PAN No.: IT Numb.

Invoice No.: SLTD000001
Invoice Dt.: 31/12/2017
Pur.Ord.No.: Dt:
Place of Supply :
Dt./Time of Supply : 31/12/2020,11:02 am

TAX INVOICE

Debit Memo

Transport: .
L.R.No.: Dt:
No. of Cases:
Veh. No.:
Reverse Charge [Y/N]: No

Billed To..
Name.....: Customer - 1
Adress...:

City.....: JUNAGADH
State....: Gujarat Code: 24
GSTIN No.:
PAN No...: PHONE: 9288349223

Shipped to..
Name.....: Customer - 1
Adress...:

City.....: JUNAGADH
State....: Gujarat Code: 24
GSTIN No.:
PAN No...: PHONE: 9288349223

Sr.	Description	HSN	Qty.	Rate	Di%	Taxable	CGST%	SGST%	NET RATE	Total
1	MILK SHAKTI 100GM	56565	5	3.96		19.80	6.00	6.00	4.44	22.18
2	KRACKJACK 75GM	22323	5	4.76	5	22.61	6.00	6.00	5.07	25.33
			10			42.41				47.51

Txable Amt	CGST%	CGST.Amt.	SGST%	SGST.Amt.	Tot.Amt.
42.41	6.00	2.55	6.00	2.55	47.51
42.41	TOTAL	2.55	TOTAL	2.55	47.51

Disc.Amt:	1.19	E. & O.E.	R/Off:	0.49
AAGLA BAKI Rs.				
CURRENT BILL Rs.		48.00		
TOTAL BAKI Rs.		48.00	TOTAL	48.00

Bank Details: **Bank Detail 1**
Bank Detail 2

Rs.: FortyEight only

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