

Template: CAgE_GST

Address Line 1 Address Line 2 City State Pin

Phone: Phone 1, Phone 2

TAX INVOICE

Original

GSTIN No.: GSTIN NUMBER

PAN No.: IT Numb.

Invoice No.: SLTDI00001 Invoice Dt.: 06/01/2018 Ord.Ord.No.: Dt.: Challan No.: Dt.: Broker Name: Transport..: RAJKOT GODAWON	Debit Memo	Vehical No...: Container No.: Seal No.....: State: State State Code...: 24
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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:
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Sr.	Description	HSN	Qty.	Unit	Rate	Disc.	Taxable	IGST%	IGST AMT.	Total
1	KRACKJACK 75GM 11111	22323	5.000	PKT	4.76		23.81	12.00	2.86	26.67
2	MONACO 75GM 33333	55555	10.000	PKT	4.77		47.65	12.00	5.72	53.37
			15.000							80.04

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