**Company Name:**
**Address:**

**Phone No.:**

**Invoice No.:**
**Date:**

# Tax Invoice

| **Bill To:** | **ShipTo:** |
|---|---|
| | |
| Billing Address: | Shipping Address: |
| | |
| Phone No.: | Phone No.: |

| Sl. No. | Service Name | HSN/SAC | Quantity | Unit | Price/Unit | GST | Amount |
|---|---|---|---|---|---|---|---|
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| **Total** | | | | | | | |

**INVOICE AMOUNT IN WORDS**

Sub Total:
Discount:
SGST :
CGST :
**Total:**
Received
**Balance**

**Terms and Conditions**

Seal & Signature