

**Company/Seller Name:**  
 Address :  
 Phone No.:  
 Email ID:  
 GSTIN:  
 State:

## Tax Invoice

<b>Bill To:</b>		<b>Shipping To:</b>	
Name:			
Address:			
		<b>Transportation Details :</b>	
		Driver Name:	
		Driver Mobile No.:	
Contact No.:		Vehicle Number:	
GSTIN No.:		<b>Invoice No.:</b>	
State:		<b>Date:</b>	

#	Item name	HSN	QTY	Unit	Price/Unit	Disc	GST	Amount

**Total**

<b>Amount in words:</b>	<b>Sub Total:</b>	
	Packaging Fee	
<b>Terms &amp; Conditions:</b>	Delivery Fee	
	Discount:	
	SGST	
	CGST	
	<b>Total</b>	
	Received	
	Balance	

Company seal and Sign