

**Company/Seller Name:**

Address :

Phone No.:

Email ID:

GSTIN:

State:

# Tax Invoice

<p><b>Bill To:</b> Name: Address:</p> <p>Contact No.:</p> <p>GSTIN No.:</p> <p>State:</p>	<p><b>Shipping To:</b></p> <p><b>Transportation Details :</b> Driver Name: Driver Mobile No.:</p> <p>Vehicle Number:</p> <p><b>Invoice No.:</b></p> <p><b>Date:</b></p>
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#	Item name	HSN	QTY	Unit	Price/ Unit	Disc	GST	Amount
<b>Total</b>								

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