Addre	e No.: I ID: N:							
			Tax	k In	voice	ļ		
Bill To: Name: Address:					Shipping To:			
	act No.: N No.:		Invoice No					
#	Item name	HSN	QTY	Unit	Price/ Unit	Disc	GST	Amount
	Total							
_	Total	_					_	
					Sub Tot	al:		
Amount in words:					Delivery Fee			
					Discount:			
					SGST CGST			
					Total			
					Balance			
Company seal and Sign								