

# A.B.C Company

Address:  
Mobile & Email

GSTIN: 24ABCDE1234F1ZT

## GST INVOICE

Original for Recipient

Duplicate for Supplier/Transporter

Triplicate for Supplier

Reverse Charge YES \_\_\_ NO \_\_\_

Invoice No. ABC/17-18/00000

Invoice Date DD/MM/YYYY

State & Code Gujarat (24)

Transportation Mode

Vehicle Number

Date of Supply

Place of Supply

Electronic Reference Number:

Details of Receiver | Billed to:

Details of Consignee | Shipped to:

Name

Address

GSTIN/UIN

State & Code

Name

Address

GSTIN / UIN

State & Code

Sr. No	Name of Product / Service	HSN	UOM	Qty	Rate	Amount	Less:	Taxable	CGST		SGST		IGST		Total
		SAC					Discount		Value	Rate	Amount	Rate	Amount	Rate	
1															
2															
3															
4															
5															
6															
			<b>Total</b>	-	-	-	-	-	-	-	-	-	-	-	-

Total Invoice Amount in Words:

Total Amount Before Tax :

Add : CGST :

Add : SGST :

Add : IGST :

Total Amount After Tax :

GST Payable on Reverse Charge :

: Bank Details :

Bank Name

Branch Name

Account Number

IFSC Code

: Terms and Conditions :

Certified that the particulars given above are true and correct

For, ABC



Authorised Signatory