

(એક્સપોર્ટર માટે)

ORIGINAL FOR RECIPIENT
DUPLICATE FOR TRANSPORTER
TRIPPLICATE FOR SUPPLIER

TAX INVOICE

"SUPPLY MEANT FOR EXPORT ON PAYMENT OF IGST"/"SUPPLY MEANT FOR EXPORT UNDER BOND WITHOUT PAYMENT OF IGST"

PHONES:		DPT & CO. "SHRIKUNJ" STATION ROAD PATAN,GUJARAT -384265 GSTIN: 24ABCDEF1ZX					
MAIL ID							
INVOICE NO:							
INVOICE DATE:							
Details of Recipient Name: Address : State: State Code : GSTIN					Details of Consignee (Shipped to) Name: Address : State: State Code : GSTIN		
S.No	Name of Goods/services	HSN Code	QUANTITY QTL/KG/GRM	Rate	Total	Taxable value	TOTAL
	KHARAJAT COMMISSION MARKET FEE જે ખાના લાગુ પડતા INSURANCE હોય તે રાખવા TRANSPORT CHARGES						
TOTAL							
Invoice Total (In Words) :					TOTAL		
BANK DETAILS (લખવી હોય તો) BANK NAME: BANK ACCOUNT NUMBER: BAN BARNCH IFSC CODE:					For DPT &CO Authorised Signatory		