

INVOICE FOR SUPPLY OF SERVICES

Tax Invoice for Supply of Service

Logo	<input type="checkbox"/> Original for Recipient <input type="checkbox"/> Duplicate for Supplier	Company Name Address 1 Mail ID Website
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GSTIN:
 Serial no. of Invoice: _____ (1)
 Date:-

Details of Receiver (Billed to) Name: Address of Supplier:- Address of Delivery:- State: State Code : _____ (3) GSTIN/Unique ID: _____	Details of Interstate Supply:- State of Supply:- Address of Supply:- Address of Delivery:-
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S.No	Description of Service	SAC Code	Total		Discount	Taxable value	CGST		SGST		IGST	
							Rate	Amount	Rate	Amount	Rate	Amount
		I M P O R T A N T			0.00	0.00		0.00		0.00		0.00
Total							0.00	0.00	0.00	0.00	0.00	0.00

Invoice Total (In Words)	Invoice Total (Figures)
	0.00
Amount of Tax subject to Reverse Charge _____ (4)	0.00 0.00 0.00

TERMS OF SERVICE	For Company Name Authorised Signatory
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- 1
 An Consecutive serial number, in One Or Multiple Series containing alphabets or Numerals or special characters, hyphen or dash and slash symbolised as "-" and "/" any combination thereof unique for every financial year;
- 2
 Name and Address of the Recipient and the address of delivery, along with Name of State and its code, if recipient is unregistered and where value of taxable supply >= 50,000/-
- 3
 Name, Address and GSTIN/unique ID no., if registered, of the recipient
- 4
 Whether the tax is payable on reverse charge basis then to be mentioned specifically