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| TAX INVOICE | | | | | | | |
| [Company Name] | | | | | | Invoice No : |  |
| Date : |  |
| Tin No : |  |
| | \* | Your company Address | | | | | | | CST No : |  |
| | ( | 1234567891 [P] Your company Fax [F] | | | | | | | Pan No : |  |
| Your company identification number / sales tax number | | | | | | Service Tax No. |  |
|  |  |  |  |  |  |  |  |
| INVOICE TO | | | | |  |  | |
|  | | | | | | Work Order No.: | |
| Vendor Code No.: | |
|  |  |  |  |  |  |  |  |
| **Sr. No** | **Description** | | **Qty.** | **Unit Price** | **VAT Rate** | **VAT** | **Amount** |
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|  |  |  |  | Transport & Handling | | |  |
|  |  |  |  | **Grand Total** | | |  |
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| 1. Make all cheques payable to **YOUR COMPANY NAME** 2. If you have any questions concerning this invoice, please contact us @ Your company number or email us at Your company email Id. 3. Goods Return Within 7 Days. | | | | | | Authorised Signatory | |
| **Thank You for Your Business** | | | | | |