

TAX INVOICE

[Company Name]

* Your company Address (1234567891 [P] Your company Fax [F] Your company identification number / sales tax number	Invoice No :	
	Date :	
	Tin No :	
	CST No :	
	Pan No :	
Service Tax No.		

INVOICE TO		
	Work Order No.:	
	Vendor Code No.:	

Sr. No	Discription	Qty.	Unit Price	VAT Rate	VAT	Amount

Subtotal	
Transport & Handling	
Grand Total	

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	