

ITCode

Name :
Phone : 919426539839
Email :

TAX INVOICE					ORIGINAL FOR RECIPIENT	
Customer Detail			Invoice No.	INV/002	Invoice Date	1/17/2026
Name : xyz Address : surat gujarat Phone : 9426539839 GSTIN : - Place of Supply gujarat			Due Date			2/15/2026
Sr. No.	Name of Product / Service	HSN / SAC	QTY	RATE	TOTAL	
1	Bags	-	1	2500.00	0.00	
Total			1	2500.00		
Total in words ZERO RUPEES ONLY				Total Amount 2500.00 (E & O.E.)		
Terms and Conditions Subject to our Home Jurisdiction. Our Responsibility Ceases as soon as goods leaves our Premises. Goods once sold will not taken back. Delivery Ex-Premises.			Certified that the particulars given above are true and correct. For ITCode Authorized signatory			