

My Company

Name :
Phone : 919725306146
Email :

TAX INVOICE						ORIGINAL FOR RECIPIENT
Customer Detail			Invoice No.	INV-007		Invoice Date
Name : ABC Corp Address : 123 Main Street Phone : 9876543210 GSTIN : 07ABCDE1234F1Z5 Place of SupplyDelhi			Due Date	2/15/2026		
Sr. No.	Name of Product / Service	HSN / SAC	QTY	RATE	TOTAL	
1	Product A	1001	5	100.00	110.00	
2	Product B	1002	3	200.00	198.00	
		Total	8	1150.00		
Total in words One Thousand One Hundred Fifty				Total Amount 1150.00 (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 My Company Authorized signatory			