



## TAX INVOICE

ORIGINAL FOR RECIPIENT

**Your Shop Name**

Your Shop Address

GSTIN: Your GSTIN

PAN Number: Your PAN

Email: your@email.com

Invoice Number: YOUR/INV/24-25/001-1105814a-8d8b-4c44-8f69-b7f4c6697d40  
Invoice Date: 12/04/2025 03:07 AM  
Due Date: 12/04/2025 03:07 AM

## SHIP TO

Customer Name

Customer Address

SL No	Particulars	HSN	Quantity	Rate	Amount
1	Item 1	HSN1	2	₹100.00	₹200.00
2	Item 2	HSN2	1	₹200.00	₹200.00

Subtotal: ₹ 400.00

Tax: ₹ 40.00

Total: ₹ 440.00