

TAX INVOICE

Original for Receipt/ Duplicate for Transporter / Triplicate for Supplier

Name and address of the seller:**GSTIN : 24ALKPD4394B1ZE****BHAGVATI CREATION**N-1-2-3 2ND FLOOR, NARAYAN NAGAR,
LIMBAYAT, SURAT
MO.98258-96898

Place Of Supply : GUJARAT

State Code : 24

Invoice No. : 9**Invoice Date : 05-04-23**

Challan No / Date

Order No / Date

Agent

Vehicle No

Transporter

L. R. No / Date

Your Challan No

Name and address of the Buyer (Billed To) :

MANAV FAB

FL NO A902 ADITYA RESIDENCY,
NANA VARACHHA, MOTI NAGAR SOC.,
Surat, Gujarat

State Name : GUJARAT

State Code : 24

GSTIN : 24ANWPK8554A2ZQ**Name and address of the Consignee (Shipped To) :**

State Name :

State Code :

GSTIN :

Item / Design No.	HSNCode	PrtChl	Pieces	Rtd	Dmg	Quantity	Rate	LessAmt	DiscAmt	TaxableAmt
DAMAN						254.00	98.00	0.00	1244.60	23647.40
D.NO 19										
DAMAN(25 INS)						285.25	93.00	0.00	1326.41	25201.84
D.NO 19										
ALL OVER	9988					159.25	235.00	0.00	1871.19	35552.56
D.NO 19										
Discount: 5.00 %						698.50		0.00	4442.20	84401.80

Bank Details:**Name:****A/C No.:****IFSC:****A/C Type:****Branch:**

INSURANCE

FREIGHT

CGST

SGST

IGST

TCS

0.00

0.00

2.50 %

2.50 %

0.00 %

0.00 %

Invoice Totals :**88622.00**

Due Date : 05-04-23

Rupees : Rupees Eighty Eight Thousand Six Hundred Twenty Two Only

Terms & Conditions :

For BHAGVATI CREATION

Receiver's Signature

Prepared By

Authorised Signatory