

	Original For Receipt
	Duplicate for Supplier/Transporter
	Triplicate for Supplier

Reverse Charge	:				
Invoice No.	:				
Invoice Date	:				
State	:	<table border="1"> <tr> <td>State Code</td> <td>:</td> <td></td> </tr> </table>	State Code	:	
State Code	:				

Transportation Mode	:	
Vehicle Number	:	
Date of Supply	:	
Place of Supply	:	

Details of Receiver Billed to:			
Name	:		
Address	:		
GSTIN	:		
State	:	State Code	:

Details of Consignee Shipped to:			
Name	:		
Address	:		
GSTIN	:		
State	:	State Code	:

[illegible]

Total Invoice Amount in Words:		Total Amount Before Tax	:	
		Add : CGST	:	
		Add : SGST	:	
		Add : IGST	:	
		Tax Amount : GST	:	
		Total Amount After Tax	:	
		GST Payable on Reverse Charge	:	
		Certified that the particulars given above are true and correct.		
		(Common Seal)		