TAX INVOICE

Original for recipient

Supplier

Name	[Your business name]
Address	[Address, city, PIN]
GSTIN	[Your 15-character GSTIN]
State & code	[e.g. Maharashtra (27)]
Phone / email	[Phone, email]

Invoice details

Invoice no.	[e.g. INV/2026-27/001]
Invoice date	[DD-MM-YYYY]
Place of supply	[Customer state (code)]
Tax type	CGST + SGST (same state)
Reverse charge	No

Bill to (recipient)

Name	[Customer's name]
Address	[Customer's address]
GSTIN	[GSTIN, if registered]
State & code	[e.g. Karnataka (29)]

Ship to (if different)

Name	[Delivery name]
Address	[Delivery address]
State & code	[State (code)]

#	Description of goods or services	HSN / SAC	Qty	Unit	Rate (₹)	Discount (₹)	Taxable value (₹)	GST rate	CGST (₹)	SGST / UTGST (₹)	IGST (₹)	Total (₹)
1	IT consulting services (example — delete this row)	998313	10	Hrs	2,500.00	1,000.00	24,000.00	18.00%	2,160.00	2,160.00	0.00	28,320.00
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
					Total	**1,000.00**	**24,000.00**		**2,160.00**	**2,160.00**	**0.00**	**28,320.00**

Round off 0.00

Invoice total (₹) 28,320.00

Amount in words [e.g. Twenty-eight thousand three hundred and twenty rupees only]

Bank details [Bank, account no., IFSC, UPI ID]

Declaration: We declare that this invoice shows the actual price of the goods or services described and that all particulars are true and correct.

For [your business name]

Authorised signatory

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