					Nam	ne of supp	olier						
						ddress of supplier							
						GSTIN of supplier							
Name of recipient							Date of invoice	e					
Address of recipient													
GSTIN of recipient								Invoice number					
		(a)	(b)	(c) =(a)x(b)	(d)	(e)	(f)	(g)= (e)x(f)	(h)	(i)=(e)x(h)	(j)	(k)=(e)x(j)	(I)=(e)+(g)+(i)+(k)
Description of supply (goods/services)	HSN code	Unit/ UQC	Value per unit	Value	Discount/ Abatement	Taxable Value	Rate of Tax	Tax Amount	Rate of Tax	Tax Amount	Rate of Tax	Tax Amount	Total amount
							CGST S		GST	IGST			
Place of supply	Address of deliv	Address of delivery				Total amount							
					Add:								
												Less	:
					Total bill amount								
Reverse charge applicable :	erse charge applicable : Yes/No						QR code (Quick response code)**						
Signature/digital signature							** mandatory	** mandatory in case of e-invoice					
(Supplier/Authorised representa													