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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Catering Bill** | | | | | | | | | |
| **Company/Seller Name:**  Address:    Phone No.:  Email ID:  GSTIN:  State: | | | | | | | | | |
|  | | | | | | | | | |
| **Bill To:** | | | | | **Shipping To:** | | | | |
| Name: | | | | |  | | | | |
| Address: | | | | |  | | | | |
|  | | | | |  | | | | |
| Customer ID | | | | |  | | | | |
| Contact No.: | | | | | **Invoice No.:** | |  | | |
| GSTIN No.: | | | | | **Invoice Date:** | |  | | |
| State: | | | | | Delivery Date: | |  | | |
|  |  |  |  |  | Due Date: | |  | | |
| **#** | **Item name** | **HSN/SAC** | **QTY** | **Unit** | **Price** | **Disc** | **GST** | **Amount** | |
|  |  |  |  |  |  |  |  |  | |
|  |  |  |  |  |  |  |  |  | |
|  |  |  |  |  |  |  |  |  | |
|  | | |  |  |  |  | **Total** |  | |
|  | | | | | | | | | |
|  | | | |  | **Sub Total:** | | |  | |
| **Amount in words:** | | | | Shipping Charges | | |  | |
| Discount: | | |  | |
| SGST | | |  | |
| CGST | | |  | |
| **Total** | | |  | |
|  | | | | Advance Payment | | |  | |
| Company seal and Sign | | | | Total Due | | |  | |
|  |  |  |  |  |
|  |  |  |  |  |
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