TAX INVOICE

GST invoice format for a canteen

Supplier name	Your business name	**Customer name**	Customer / business name
Address	Shop/office address, city, state, PIN	**Customer address**	Billing address
GSTIN	27ABCDE1234F1Z5	**Customer GSTIN**	If registered (B2B)
Invoice no.	INV/25-26/0001	**Contract number and period**	
Invoice date	DD/MM/YYYY	**Meal counts by category**	
Place of supply	State name (state code)	**Rate per meal**	
		Employer and employee portions	
		Client GSTIN and site address	
		Kitchen FSSAI licence	

#	Description	HSN/SAC	Qty	Rate	Taxable	GST	CGST	SGST	Total
1	Lunch, general shift (October)	996333	4200 MEAL	65.00	273,000.00	5%	6,825.00	6,825.00	286,650.00
2	Dinner, night shift (October)	996333	1100 MEAL	70.00	77,000.00	5%	1,925.00	1,925.00	80,850.00
3	Tea and snacks, both shifts (October)	996333	6000 NOS	12.00	72,000.00	5%	1,800.00	1,800.00	75,600.00
4	Breakfast, morning shift (October)	996333	2300 MEAL	35.00	80,500.00	5%	2,012.50	2,012.50	84,525.00
								Taxable	502,500.00
								GST	25,125.00
								Total (Rs.)	**527,625.00**

Inter-state sale? Replace CGST + SGST with IGST at the full GST rate.

Amount in words: _____

Bank / UPI details: _____

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

For (Supplier name) — Authorised signatory

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