TAX INVOICE

GST invoice format for a diabetic care store

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	**Strip compatibility with meter model**	
Invoice date	DD/MM/YYYY	**Batch and expiry for strips and insulin**	
Place of supply	State name (state code)	**Cold-chain note for insulin**	
		Meter serial number and warranty	
		Prescription reference for insulin	
		FSSAI licence for foods	

#	Description	HSN/SAC	Qty	Rate	Taxable	GST	CGST	SGST	Total
1	Blood glucose meter kit	9027	1 PCS	1,100.00	1,100.00	5%	27.50	27.50	1,155.00
2	Glucose test strips (pack of 50)	9027	2 PCK	850.00	1,700.00	5%	42.50	42.50	1,785.00
3	Insulin pen cartridge 3 ml	3004	5 PCS	420.00	2,100.00	5%	52.50	52.50	2,205.00
4	Diabetic food — sugar-free high-fibre biscuits 200 g	21069091	3 PCK	120.00	360.00	5%	9.00	9.00	378.00
5	Digital clinical thermometer	9025	1 PCS	220.00	220.00	5%	5.50	5.50	231.00
								Taxable	5,480.00
								GST	274.00
								Total (Rs.)	**5,754.00**

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

Free template from billingsoftware.co (Billing Software by Betterwork)