TAX INVOICE

GST invoice format for a telemedicine practice

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	**Doctor's registration and council**	
Invoice date	DD/MM/YYYY	**Consultation mode**	
Place of supply	State name (state code)	**Date, time and duration**	
		E-prescription number	
		Patient's state	
		Platform or convenience fee shown separately	

#	Description	HSN/SAC	Qty	Rate	Taxable	GST	CGST	SGST	Total
1	Video consultation — general physician (15 minutes)	999312	1 VISIT	400.00	400.00	0%	0.00	0.00	400.00
2	Video consultation — dermatologist (20 minutes)	999312	1 VISIT	700.00	700.00	0%	0.00	0.00	700.00
3	Follow-up chat consultation within 7 days	999312	1 VISIT	150.00	150.00	0%	0.00	0.00	150.00
4	Second-opinion review of reports by specialist	999312	1 NOS	1,500.00	1,500.00	0%	0.00	0.00	1,500.00
								Taxable	2,750.00
								GST	0.00
								Total (Rs.)	**2,750.00**

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)