

[TEXTILE MILL NAME]

Factory Address Line 1
City, State, Zip
Tax ID: [Number]

TAX INVOICE

Invoice #: _____
Date: [DD/MM/YYYY]

Bill To:

[Client Name/Company]
[Shipping Address]
[GST/VAT Number]

Order Details:

PO Number: [_____]
Delivery Note: [_____]
Dispatch Via: [_____]

Fabric Description (GSM/Width)	Color/Lot	Quantity (Mtr/Kg)	Rate	Amount
[Product Name / Fabric Type]	[Shade #]	[0.00]	[0.00]	[0.00]

Payment Terms:

Bank Name: [Name]
Account: [Number]
IFSC/SWIFT: [Code]

Subtotal: 0.00
Tax ([0] %): 0.00
Shipping: 0.00

Total: 0.00

Declaration: Fabric quality as per approved lab dip. Goods once sold are not returnable.

Authorized Signatory
