

Purchase Invoice

Invoice No: _____

Date: _____

Vendor Name: _____

Vendor Address:

Buyer Name: _____

Buyer Address:

Sr. No.	Description of Goods/Services	Quantity	Rate	Amount
1	_____	_____	_____	_____
Total				_____

This invoice is issued for transactions where GST is not applicable.

Authorized Signatory: _____