			REC	EIPT VOUCHI	ER		
(Under Section 31(3)(d) & Rule 50)							
	o of the cany (Not	Name of the Company					
Compulsory)		Address:				Email:	
		Phone:				Serial No.:	
			•			Date:	
		GSTIN:			Tax Is payable under Yes/No Reverse Charge:		
Recipient Details							
		Name:			Place of Supply:		
		Address			State:		
		State: GSTIN/UIN:			State Code: (Compulsory in	acce of inter	matata aumniy
		GS11N/UIN:			1 (Compulsory in	case of fifte	r state supply)
S.No.	Description of Goods or/and Services			Amount of Advance taken	Rate of Tax	Amount of Tax charged	
					CGST		
					SGST/UTGST		
					IGST		
	'			•	•	'	
Amount of Advance(in words):							
Amount of tax charged (in words):							
Signaure/Digital Signaure Supplier or his authorized Representative							