FORM VAT-XIX

[See rule 53(3)]

RETAIL INVOICE

						FOR PURCHASER SELLER'S COPY								
								SEL	LEK	<u>s</u> C	UP	<u>1</u>		
Name	:													
Addre	ess:													
Telephone Number			Fax	Fax Number				E-mail Address						
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Serial N	0.					Date TIN				+			\dashv	
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Purchas	er's Pai	rticu	lars:											
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Name														
Address	:						•	T						
TIN:														
Sl.No.	Otry	I Da	garintia	n	Price	Value of goods								
S1.1NO.	Sl.No. Qty.		Description of goods		per		value of goods							
			goods		unit	1%		4%		12.5%		-	Total	
					unit									
1.														
2.														
3.		<u> </u>			<u> </u>							4		
Total of	1 to 3 (Price	e of good	ds wi	thout									
VAT)	11.1T.											+		
Value Added Tax Total price (price of goods + VAT)												_		
10tai pri	ce (pric	01	goods +	VAI	.)	1								
					GR No									
N	ame an	d ad	ldress of	Tran	sport Co									

Signature of the dealer or authorised agent (with seal)

Status:	Tick	()	applicable	[Karta,	proprietor,	partner,	director,	president,
secretar	y, man	ager	, authorised	agent]				

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