

(PRINT ON YOUR LETTER HEAD) ---> FORMAT 2021
TAX INVOICE / CREDIT BILL (ANNEXURE – TP/TC-3)

Invoice No :		TAX INVOICE / CREDIT BILL	Date :	
GST IN No.:			PAN No.:	
Recipient ID :			TAN :	
Training Provider Address			VTP No :	

To,
The Managing Director,
Kaushalya Mission – KSDC,
3rd Floor, Kaushalya Bhavan, Near Dairy Circle,
Bannerughatta Road, Bangalore-560029.

PARTICULARS

TP Name		CAAF No:	
TC Name		HOA TYPE	
SECTOR		Category (SCP/TSP/General)	
JOB ROLE			

Skill Training Program Under CMKKY

Sl. No.	Batch (CFBT No.)	Training Duration NSQF	Trg. Cost Rs./Hr./ Candidate	No. of Candidates Trained	Total Amount (in Rs.)	1 st Trench @ 50% of Total Amount (in Rs.)
Grand Total						

Rupees in Words		
Account Details	Name of the Account:	
Recipient ID	Account No.:	
	Bank Name & Branch:	
	IFSC Code:	
Remarks		

Authorized Name & Signature
(with seal)