

GSTIN no.:

State : State Code:

RA Bill No.:*Highrise***Name of Project :****Name of Contractor :****Executed By :****Work Order No. :****Voucher No. :****Date of Bill :****Contractor Bill No:**

GSTIN No.:

State: State Code:

Item No.	Description	Unit and pay. schedule stage	WO Quantity	WO Rate	WO Amt	Quantity			Amount (in Rs.)		
						Previous	This Bill	Cumulative	Previous	This Bill	Cumulative
1	SAC :										
A TOTAL AMOUNT OF WORK DONE											
B ADJUST FOR BASIC MATERIAL RATE VARIATION (+)										0.00	
C ADJUST FOR BASIC MATERIAL CONSTANT VARIATION (+)										0.00	
D ADJUST CREDITS (-)											
E ADJUST DEBITS (-)											
Previous Amount:		Current Amount:		Cumulative Amount:							
F TAXES (+)											
VAT											
SERVICE TAX											
GST											
GST Details:											

Total GST For Provider		Total GST For Receiver		Total GST	
Total CGST		Total CGST		Total CGST	
Total SGST		Total SGST		Total SGST	
Total IGST		Total IGST		Total IGST	
Total					
G ADVANCE RECOVERY (-)					
Uptodate Advance Amount:		Uptodate Advance Recovery:		Balance Amount:	
H OTHERS (+)					
I RETENTION (-)					
J TOTAL AMOUNT					
K T.D.S AMOUNT					
J WCT TDS AMOUNT					
L AMOUNT PAYABLE					
Wo Total Amt		Total RAbill Amt		Total Ret Amt	
Prepared By Manager - Billing GM- Operations Manager - Accounts President Director					