FORM VAT-31

[See rule 53]

SPECIMEN OF SALES REGISTER (Taxable Persons)

Place:		District:		VRN/TRN:												Date of validity :			/			/	2	0		

Firm Name:	**M/s**	**Sales for the period**

Address:		From:			/			/	2	0			To:			/			/	2	0		

VAT / Retail Invoice				Total value of invoice.	**Exports out of India**				**Inter-state sales**			**Consignment or branch transfers**			Output Tax
Date	Invoice No.	Buyers Name	State/CST RC No.		Value	VAT paid @ __%	VAT	Total zero rated sales	Value	CST @ ___%	Total Inter State sale	Value	VAT @ u/s 17A	Total Tax payable	

Sale to Taxable Person		**Sale to Consumers/ToT**	
Value of goods	VAT charged	Value of goods Sold	Tax payable/ Charged