

FORM VAT-39

[See rule 69]

TRANSPORT RECEIPT (TR/GR)

Sr. No						Date		/		/	2	0		
From						To								
Delivery					Delivery									
From						at								
Name of Consignor with complete address														
Registration Number :					VRN/TRN:									
					CST No.:									
Name of Consignee with complete address														
Registration Number:					VRN/TRN:									
					CST No.:									
No. of Packing	Method of packing	Contents as declared	Value	Private Mark if any	Weight		Rate	Total Freight		Freight		Remarks		
					Actual	Charged		Rs.	P.	Paid	To			
					Q.-Kgs	Q.-Kgs					Pay			
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.		
Signature of the Manager / Booking Clerk														
Name of Transport Company / Booking Agency														