

**FORM 202 B**  
( List of Sale )  
See sub-rule (3) of rule 19

**List of sale of goods against retail invoice in the State**

Registration Certificate No. :

Name and style of Business : .

Tax Period From : // To //

**A. List showing sale of goods to registered dealers.**

Sr. No.	Retail Inv. No	Date	Name with RC No. of the registered dealer to whom goods sold		Turnover of sale of goods	
			Name	R.C.No	Goods with HSN	Amount (Rs.)
1						
<b>Total</b>						

**DECLARATION**

I, \_\_\_\_\_ (name in CAPITALS), hereby declare that the contents of the above lists and table are true and correct and nothing has been concealed therein.

(X)

Full signature of the authorised signatory

Place :

Name :

Date : //

Status :

Note : An authorized person alone shall sign each page of this list. A list signed by any person not authorised or an unsigned shall be treated as invalid.