GOAFEST 2019 : CONTROL SHEET
BROADCASTER ABBY

Summary of the Total Entries Submitted

Date: _____

Entrant Details :

Entrant Organisation Name: _____
Organisation Address (as per GST Registration) : _____
_____
_____
GST Registration No. _____
Contact Person & Designation: _____
Contact No. (Cell No.): _____
Email ID.: _____

Invoice Details :

Billing Organisation Name : _____
Organisation Address (as per GST Registration) : _____
_____
_____
GST Registration No. _____

Category No.	Category Name	No. of Entries	Entry Fee

Total Number of Entries: _____

Total Entry Fee Amount: _____

Cheque No./DD No.: _____

Cheque/DD Date: _____

Bank:_____

NEFT / RTGS / Mobile Banking Details :

Reference No.	
UTR No.	

I hereby declare that above mentioned entry details to be considered to generate an invoice in the name of our agency mentioned in the column Invoice Details.

Signature of the Entrant Representative

Company Seal