FORM ST-32

(in triplicate)

[See rule 40-A(c)]

WAY BILL

Book No			Serial	Serial No	
			Date.		
Name of the	Transport Ager	acy/Carrier of g	oods:		
Place of desp	atch:				
Place of desti	nation				
Goods Receip	ot No				
Goods Receip	ot Date				
consignor alo	nplete address ong with R.C No and CST Act,	o under			
Serial No. & date of the bill of Sale issued by the seller/certificate of ownership issued by the consignor			Sl. No	Date.	
Name & full a other than co	address of the s	eller if			
Name & full a Purchaser of	address of the c	consignee/			
GST No	u	nder local Sales	Tax Act.		
CST No	1	under C.S.T Act	, 1956		
(b) (c)	f goods:- Nature of goo No of packag Weight Sale price of	es.			

(e) Mark, if any.

Vehicle number in which loaded for Despatch to the destination

Date of despatch of the goods to the Destination.

Signature of the Manager Or regular employee of the Transport Agency.

FOR USE AT THE CHECK POST

Name of the Check post

Date of crossing of the goods from the Check post

Goods if detained brief reasons thereof.

Signature of the Officer with Designation by whom checked.

Countersignature of the officer Incharge Checkpost