

Invoice

To,
RECEIVER (BILL TO)

Name : tesy

Billing Address : xxx

Reverse Charge

Invoice No. : 5555

Invoice Date : 2020-11-24

Sr No.	Item Name	Quantity	Price	Actual Amt.	Tax1 (%)		Tax2 (%)		Tax3 (%)		Total
					Rate	Amt.	Rate	Amt.	Rate	Amt.	
1	SAMPLE TAPE 1	5.00	5.00	25.00	5.00	1.25	2.00	0.50	1.00	0.25	27.00
Total											27.00
Total Amt. Before Tax :											25.00
Add : Tax1 :											1.25
Add : Tax2 :											0.50
Add : Tax3 :											0.25
Total Tax Amt. :											2.00
Total Amt. After Tax :											27.00