

## Invoice

To,  
**RECEIVER (BILL TO)**  
Name : X  
Billing Address : Z

Reverse Charge  
Invoice No. : 00091  
Invoice Date : 2021-06-10

Sr No.	Item Name	Quantity	Price	Actual Amt.	Tax1 (%)		Tax2 (%)		Tax3 (%)		Total
					Rate	Amt.	Rate	Amt.	Rate	Amt.	
1	A	100.00	5000.00	500000.00	0.00	0.00	0.00	0.00	0.00	0.00	500000.00
2	B	50.00	5000.00	250000.00	0.00	0.00	0.00	0.00	0.00	0.00	250000.00
3	C	50.00	5000.00	250000.00	0.00	0.00	0.00	0.00	0.00	0.00	250000.00
4	D	5.00	10000.00	50000.00	0.00	0.00	0.00	0.00	0.00	0.00	50000.00
5	E	3.00	4500.00	13500.00	0.00	0.00	0.00	0.00	0.00	0.00	13500.00
<b>Total</b>											<b>1063500.00</b>
<b>Total Amt. Before Tax :</b>											1063500.00
Add : Tax1 :											0.00
Add : Tax2 :											0.00
Add : Tax3 :											0.00
<b>Total Tax Amt. :</b>											0.00
<b>Total Amt. After Tax :</b>											1063500.00