

## Invoice

To,  
**RECEIVER (BILL TO)**  
Name : Nishad E K  
Billing Address : test address

Reverse Charge  
Invoice No. : AE/10112  
Invoice Date : 2021-06-18

Sr No.	Item Name	Quantity	Price	Actual Amt.	Tax1 (%)		Tax2 (%)		Tax3 (%)		Total
					Rate	Amt.	Rate	Amt.	Rate	Amt.	
1	test 1	2.00	500.00	1000.00	9.00	90.00	9.00	90.00	0.00	0.00	1180.00
<b>Total</b>											<b>1180.00</b>
<b>Total Amt. Before Tax :</b>											1000.00
Add : Tax1 :											90.00
Add : Tax2 :											90.00
Add : Tax3 :											0.00
<b>Total Tax Amt. :</b>											180.00
<b>Total Amt. After Tax :</b>											1180.00