

## Invoice

To,  
**RECEIVER (BILL TO)**  
Name : OK  
Billing Address : rrrr

Reverse Charge  
Invoice No. : 5645  
Invoice Date : 2021-07-15

Sr No.	Item Name	Quantity	Price	Actual Amt.	Tax1 (%)		Tax2 (%)		Tax3 (%)		Total
					Rate	Amt.	Rate	Amt.	Rate	Amt.	
1	ok	50.00	2.00	100.00	9.00	9.00	9.00	9.00	9.00	9.00	127.00
<b>Total</b>											<b>127.00</b>
<b>Total Amt. Before Tax :</b>											100.00
Add : Tax1 :											9.00
Add : Tax2 :											9.00
Add : Tax3 :											9.00
<b>Total Tax Amt. :</b>											27.00
<b>Total Amt. After Tax :</b>											127.00