

Invoice

To,
RECEIVER (BILL TO)
 Name : Teste a
 Billing Address : Teste A

Reverse Charge
 Invoice No. : 001
 Invoice Date : 2021-10-11

Sr No.	Item Name	Quantity	Price	Actual Amt.	Tax1 (%)		Tax2 (%)		Tax3 (%)		Total
					Rate	Amt.	Rate	Amt.	Rate	Amt.	
1	Mouse	685.00	1000.00	685000.00	1.00	6850.00	50.00	342500.00	7115.00	48737750.00	49772100
Total											49772100
Total Amt. Before Tax :											685000
Add : Tax1 :											6850
Add : Tax2 :											342500
Add : Tax3 :											48737750
Total Tax Amt. :											49087100
Total Amt. After Tax :											49772100