

Invoice

To,
RECEIVER (BILL TO)
Name : tet
Billing Address : test

Reverse Charge
Invoice No. : e
Invoice Date : 2021-11-02

Sr No.	Item Name	Quantity	Price	Actual Amt.	Tax1 (%)		Tax2 (%)		Tax3 (%)		Total
					Rate	Amt.	Rate	Amt.	Rate	Amt.	
1	te	3.00	3.00	9.00	0.00	0.00	3.00	0.27	3.00	0.27	9.54
Total											9.54
Total Amt. Before Tax :											9.00
Add : Tax1 :											0.00
Add : Tax2 :											0.27
Add : Tax3 :											0.27
Total Tax Amt. :											0.54
Total Amt. After Tax :											9.54