

Invoice

To,
RECEIVER (BILL TO)
Name : Sarah
Billing Address : Klang

Reverse Charge
Invoice No. : test
Invoice Date : 2018-07-02

Sr No.	Item Name	Quantity	Price	Actual Amt.	Tax1 (%)		Tax2 (%)		Tax3 (%)		Total
					Rate	Amt.	Rate	Amt.	Rate	Amt.	
1	222	22.00	22.00	0.00	0.00	0.00	0.00	0.00	0.00	484.00	
2	11	11.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	11.00	
Total										495.00	
Total Amt. Before Tax :										0.00	
Add : Tax1 :										0.00	
Add : Tax2 :										0.00	
Add : Tax3 :										0.00	
Total Tax Amt. :										0.00	
Total Amt. After Tax :										495.00	