

DOCUMENT No.:

DATE/TAX POINT:

YOUR REF:

To:

Delivery Address (if different)

F.A.O.

			LINE VALUE	VAT CODE

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V.A.T. ANALYSIS

CODE	GOODS TOTALS	RATE %	VAT TOTALS

TOTAL GOODS	
TOTAL	
TOTAL V.A.T.	
TOTAL DUE	