Proforma Invoice

Invoice Number : 1234567890123
Payment Due date : 12/08/2024

Invoice Generated Date: 12/04/2024

From: To:

SABC Pharma Agency

Khalid Bin Al Waleed Rd-Al Raffa-Dubai

United Arab Emirates

Mobile No.: +971 123456789 Email ID: sabs@gmail.com Sheetal Medical Store
House No. 12 City Place Dubai

Dubai (United Arab Emirates)
Mobile No.: +971 147852369

Email ID: sheetal@gmail.com

S.NO NAME QTY LISTED PRICE TAX% TOTAL AMOUNT

1. Paracetamol (500mg) 50 12 AED 2% 500 AED

Deposit Amount: 30% Advance Done Subtotal: 200 AED

Amount Due: 70% Amount Due Tax %: 4400 AED

Grand Total: 1425500 AED

Payment Terms:

- Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s,
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