## **Test Organization**

## **INVOICE TEST-PDF-001**

testorganization@test.com +1-390-925-6195 Issue Date: 2025-10-01

Due Date: 2025-10-31

\$130.00

**BILL TO:** 

TO: PAYMENT TERMS:

Kara Rogahn

Sophie\_Ortiz1@gmail.com (706) 612-7783 x606 CAD \$1,130.00 Deposit: \$0.00

Status: SENT

Description	Quantity	Unit Price	Tax Rate	Total
	Subtotal:		\$1,000.00	

Tax:

Total:	\$1,130.00
Paid:	\$0.00

Balance Due: \$1,130.00

**Terms & Conditions:** 

Net 30 days