

testorganization@test.com  
+1-965-822-6560

**INVOICE TEST-PDF-001**

Issue Date: 2025-10-01  
Due Date: 2025-10-31

**BILL TO:**

Rafaela Ziemann  
Hal.Mertz@gmail.com  
1-606-629-1349 x810

**PAYMENT TERMS:**

CAD \$1,130.00  
Deposit: \$0.00  
Status: SENT

DESCRIPTION	QUANTITY	UNIT PRICE	TAX RATE	TOTAL
-------------	----------	------------	----------	-------

Subtotal:	\$1,000.00
Tax:	\$130.00
<b>Total:</b>	<b>\$1,130.00</b>
Paid:	\$0.00
<b>Balance Due:</b>	<b>\$1,130.00</b>

**Terms & Conditions:**

Net 30 days

THANK YOU FOR YOUR BUSINESS!