PROFORMA INVOICE

Invoice Date: 29-06-2023 Invoice No.: PI/Su/23-24/06/54 Track Id: Su290623040200V ApplyFor : Attestation

Bill To Name : Dr. sdfsdf Mobile No : sdfsdf Email : 45345346 Address : dftgfhg Ship To Name: Dr. sdfsdf Mobile No: sdfsdf Email: 45345346 Address: dftgfhg

#	Name & Documents	Type Of Attestation	HSN/SAC	Qty	Rate	Amount
1	Dr. fghfgj (India) Aadhar Card Adoption Certificate Acceptance Letter	English Translation	46546	3	1000	3000
Total In Words: Five Thousand				SubTotal 3000 Net Amount Before Tax 3000		
				Embassy Fees 20		
				Net Amount I	5000	
Terms & Conditions :-				For Excellent Apostille Services,		
Terms & condition test MyTC				ptsu		
				Authorized Signature		