

INVOICE

Invoice Date: 06-04-2023 Invoice No.: Su/23-24/04/8 Track Id: Su060423042436s

ApplyFor: Attestation

Bill To Name: Miss. 45645656 Mobile No: 9855464763 Email: grishmaborda.tls@gmail.com Address: surat

Ship To Name: Miss. 45645656 Mobile No: 9855464763 Email: grishmaborda.tls@gmail.com Address: drgdf

#	Name & Documents	Type Of Attestation	HSN/SAC	Qty	Rate	Amount
1	Dr. dfrtgdrgfd (India) Aadhar Card Acceptance Letter	Gujarat HRD	46546	2	7500	15000
Total In Words: Fifteen Thousand				SubTotal Net Amount I Net Amount I	15000 15000 15000	
Terms & Conditions :-				For Excellent Apostille Services,		
Terms & condition test My TC				Authorized Signature		