Rate

**Authorized Signature** 

Amount

## INVOICE

Invoice Date: 10-05-2023 Invoice No.: Su/23-24/05/20 Track Id: Su100523112418G ApplyFor: Attestation

Bill To Name : Dr. ### Mobile No : 01123123123 Email : testttttttttttttt Address : tgbhfgh Ship To Name : Dr. ### Mobile No : 01123123123 Email : testttttttttttt Address: tgbhfghghbgh

HSN/SAC

Qty

#		Name & Documents	Type Of Attestation	
gh	lbg h			ç

1	Dr. @@@@@ (India) Aadhar Card Acceptance Letter	Gujarat HRD	46546	2	7500		15000	
Total In Words: Twenty-Three Thousand					SubTotal			
					Net Amount Before Tax			
					EmbassyFees			
		Net Amount In INR			23000			
Terms & Conditions :-					For Excellent Apostille Services,			
Terms & condition test MyTC					ptsu			