

INVOICE

Invoice Date: 13-04-2023 Invoice No.: Su/23-24/04/71 Track Id: Su130423025322V

ApplyFor: Attestation

Bill To
Name: Dr. \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*
Mobile No: sdfsdfsdfsd
Email: testsadadadasdasdas@g mail.com
Address: surat Ship To
Name: Dr. \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*
Mobile No: sdfsdfsdfsd
Email: testsadadadasdasdas@gmail.com
Address: ddfsdfsd

#	Name & Documents	Type Of Attestation	HSN/SAC	Qty	Rate	Amount	
1	M/S xyz (India) Aadhar Card Additional Qualification Certificate Adoption Certificate	English Translation	46546	3	1000	3000	
Total In Words: Twenty-Seven Thousand				SubTotal 3000			
				Net Amount Before Tax 3			
				Embassy Fees 24000			
				Net Amount I	n INR	27000	
Terms & Conditions :-				For Excellent Apostille Services,			
Terms & condition test MyTC			Julhorized Signature				
					$\cup$		