

## PROFORMA INVOICE

Invoice Date: 30-06-2023 Invoice No.: PI/Su/23-24/06/71 Track Id: Su300623095142V ApplyFor: Apostille

Bill To Name: Dr. dfgfgh Mobile No: fghfgh Email: tlstestmail2023@gmail.com Address: fgfgbh Ship To Name: Dr. dfgfgh Mobile No: fghfgh Email: tlstestmail2023@gmail.com Address: fgfgbh

#	Name & Documents	Type Of Apostille	HSN/SAC	Qty	Rate	Amount
1	Dr. sdsdf (India) Address Proof Adoption Certificate Acceptance Letter	Apostille Attestation Process	46546	3	11000	33000
Total In W ords : Thirty-Three Thousand				SubTotal 33   Net Amount Before Tax 33   Net Amount In INR 33		
Terms & Conditions :-				For Excellent Apostille Services,		
Terms & condition test MyTC				prsu		
				Authorized Signature		