

SALES INVOICE

SUPPLIER :

Created By : Rizwan

Name : N.A.

Email : N.A.

Phone : N.A.

Address : N.A.

S/N	Product	PadNO	Unit	Price	Quantity	VAT	Subtotal
1	Dr. Betsy Wiegand I	789	N.A.	20.00	4.00	5.00	500.50
2	Twila Thompson	789	N.A.	20.00	4.00	2.00	500.50
Terms & Conditions :		Vendor Note :			Total(AED)		0.00
TermsAndCondition		supplierNote			VAT (5%)		50.00
					Grand Total(AED)		550.00

Amount in Words : five hundred and fifty AED

Accepted By (Name & Signature) :

Issued By (Name & Signature):