****

**[@CompanyName]**

**[@SSMNo]**

**[@Address1]**

**[@Address2]**

**[@Address3]**

**[@Address4]**

**[@GSTNo]**

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| **Date** | **:** | **[@TxDate]** |
| **Component** | **:** | **[@ComponentCode]** |
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| **Tax [@ST]** | **:** | **RM [@Tax]** |
| **Total Amount** | **:** | **RM [@TA]** |

**[@EWPaymentType]**

|  |  |  |
| --- | --- | --- |
| **Error Code** | **:** | **[@Code]** |

**Please retain this receipt, for future reference. Thank You. For any queries, please call our Careline Centre.**

**Phone : [@Careline]**

**Email : [@Email]**

**LecShine App Sales (Failed)**