

TestingCompany(DontReplace)

TRN :

Purchase Invoice

Bill To (Consignee)		Invoice No.	: PIV-25/108
Name	: ADCB	Invoice Date	: 31-07-2025
Address	:		
Phone No.	:		
TRN	:		
State	: -		
Tower	: MY PROPERTY		

S No	Description	Unit	Value	VAT %	VAT Amount	Total Amount (Inc.VAT)
1	Particulars	None	100.00	0.00	0.00	100.00
Total : AED One Hundred Only					Gross	100.00
					Discount	0.00
					VAT Amount	0.00
					NET Amount	100.00

Additional Remarks :