INVOICE

Bill From:

my compeny my address

Phone: 9999999999 Email: test@gmail.com

Bill To: cl name cl address



Invoice Date: 2025-04-18

Terms: no tearm
Due Date: 2025-04-18

SI.No	Item & Description	Qty	Amount
1	7uyjyu	10	Rs. 50.00
2	fdhjh	5	Rs. 50.00
Subtotal		Rs. 750.00	
Total			Rs. 750.00
Advance Payment		Rs. 500.00	
Balance Due			Rs. 250.00

Total in Words: Seven Hundred Fifty Only

Account Details:

UPI Account Name: my upi UPI ID: sdffghjgh@fhfgjh



Terms & Conditions:

yfgjgg