INVOICE



Invoice #: MIT/2013-14/SYSTEM/028AA

Invoice Date: 03-Oct-13

New York, NY 10003. Phone:914-461-4342

BILL TO:

Test Client

TEST COUNTRY

| | Order # | Order Date | Project fro | m: | Сору То: | | |
|---------|--|--|---------------|------------|-----------------|-------------------|-----------|
| | | | | : | | | |
| Sr.No | | Services | Q | uantity | Unit Price | Per | Amount |
| 1 | Here is test data | | | 27.12 | \$ 15.00 | Hour | \$ 406.80 |
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| lescrib | ner's duly authorized signed work has been received. | Pay From This Invoice nature below is an agreemented and accepted by Custom | er. Customer | In Words | AUD FOUR HUNDE | TOTAL | \$ 406.8 |
| ssures | s payment of this invoice | e. Any discrepancy in the inv e date of receiving this invol | oice is to be | Til Wolds: | AUD FOUR HUNDRE | א אוא א אטן 100 (| JINLT |
| | | | | | DAY THIS | AMOUNT (\$) | \$ 406.80 |

Payment Details:

Payment should be transferred to:

CITI Bank N.A.

A/c. No.9941997093 Routing No. 021000089 MADHVI BHANDARI CHIEF OPERATING OFFICER

----THE PERSON SIGNING THIS INVOICE ON BEHALF OF CUSTOMER REPRESENTS THAT HE/SHE HAS THE AUTHORITY TO DO SO.----

| Received and Accepted By: | Thank You For Your Business! | Date: |
|---------------------------|------------------------------|-------|
| | | |