## **INVOICE**



36 East 12th Street, Suite # 402 New York, NY 10003. Phone:914-461-4342

**BILL TO:** 

CM\_A\_M Client Test AHMEDABAD, GUJARAT - 382443 INDIA Invoice #: MIT/2020-21/SYSTEM/001

Invoice Date: 31-Jul-20

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	Order #	Order Date	Project fro	m:	Сору То:		
	TestCM						
Sr.No		Services	Q	uantity	Unit Price	Per	Amount
1	Development			1.000	\$ 25.0000	Hour	\$ 25.00
Please Pay From This Invoice				TOTAL \$ 25.00			
Customer's duly authorized signature below is an agreement that the above described work has been received and accepted by Customer. Customer assures payment of this invoice. Any discrepancy in the invoice is to be reported within 7 days from the date of receiving this invoice.				In Words: USD TWENTY FIVE ONLY			
					PAY THIS A	AMOUNT (\$)	\$ 25.00

**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.----\*