## **INVOICE**



**Invoice #:** MIT/2013-14/024 Invoice Date: 31-Aug-13

Phone:914-461-4342

**BILL TO:** 

Test Client

**TEST COUNTRY** 

	Order #	Order Date	Project fro	m:		Сору То:	
	ABC001						
Sr.No	S	ervices	Q	uantity	Unit Price	Per	Amount
1	VPCRM			27	\$ 5.00	Hour	\$ 136.60
2	Fury Group			2712	\$ 0.30	Image	\$ 813.60
	Test Description						
3	Discount Amount			27	-\$ 1.00	Document	-\$ 27.32
Please Pay From This Invoice					TOTAL	\$ 922.88	
describ assures	ner's duly authorized signatu led work has been received a s payment of this invoice. An led within 7 days from the dat	and accepted by Custom y discrepancy in the inv	ner. Customer voice is to be	In Words:	#NAME?		
					PAY THIS	AMOUNT (\$)	\$ 922.88

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: