INVOICE

Invoice #: MIT/2013-14/SYSTEM/505

Invoice Date: 28-Feb-14



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

BILL TO:

Vantage Point Consulting, Inc. 308 Center Oaks Trail, Bay Shore NEW YORK - 11706 USA

Order # **Order Date** Project from: Copy To: Test Sr.No **Services** Quantity **Unit Price** Per **Amount** 1 Item 1 1.000 \$ 1.0000 Case/File \$ 1.00 **Please Pay From This Invoice** TOTAL \$ 1.00 Customer's duly authorized signature below is an agreement that the above described work has been received and accepted by Customer. Customer In Words: USD ONE ONLY assures payment of this invoice. Any discrepancy in the invoice is to be reported within 7 days from the date of receiving this invoice. **PAY THIS AMOUNT (\$)** \$ 1.00

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.----

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