

Your Company Name Pvt Ltd

Address Line 1 City, State - 400001
Email: info@yourcompany.com | Phone: +91-9876543210
GST: 27AAAAA0000A1Z5

TAX INVOICE

Invoice Number: INV-2025-0002 Invoice Date: 10-Dec-2025
Due Date: 10-Dec-2025 Payment Method: UPI

BILL TO:

Company A
test
-
Email: workingprojects2025@gmail.com
Phone: 321456987

#	Description	Qty	Rate	Amount
1	New License	1	■847.46	■847.46

Subtotal: ■847.46
GST (18%): ■152.54

Total Amount: ■1,000.00

Notes:
Thank you for your business!

This is a computer-generated invoice. No signature required.
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