

# Invoice

Invoice No-    Date -

**Billed To:**      Billing Address:

Phone  
Number:

GSTIN:

Place of  
Supply:

SNo.	Service Name	Qty	SAC	Price
1	busnies name	1	7999	5500.00
BASE PRICE:				1500.00
CGST @9%:				5.00
SGST @9%:				10.00
Total PRICE				<b>USD 1495.00</b>

PAYMENT RECEIVED:

**Note**

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