INVOICE

8308004796

213-546-789 your@email.comyour website

Your Address city, State, Country ZIP code

Billed To Date: 19/07/2021, 23:08:56 **Testing**Rill No : 417

Testing Bill No : 417 dev@kaalpanik.in

Vehicle No	Fuel Type	Quantity	Total
645	Extra Premium	10	540.00
Total Amount			540.00



Signature

- Order can be return in max 10 days.
- Warrenty of the product will be subject to the manufacturer terms and conditions.
- This is system generated invoice.