

INVOICE

213-546-789
your@email.comyour website

Your Address
city, State, Country
ZIP code

Billed To
Testing
dev@kaalpanik.in
8308004796

Date: 04/09/2021, 21:57:41
Bill No : 851

| Vehicle No | Fuel Type | Quantity | Total |
|--------------|---------------|----------|--------|
| 645 | Extra Premium | 1 | 100.00 |
| Total Amount | | | 100.00 |



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.