



# INVOICE

INVOICE NO:

BILLED TO:

DATE:

DESCRIPTION

AREA

PRICE

---

TOTAL AMOUNT

## PAYMENT DETAILS

Mandiri

900 00 39471140

Rahima Ramadhani Wiyatasari

PAYMENT TERMS:

## CONTACT

@dinusstudio

0896 7868 0168

dinusstudio@gmail.com