

Your company name

Street address
City, street, ZIP code
Phone number, web address, ecc.

Date: Friday 30 July

Invoice # INV0001

Bill to:	Ship to:
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ABC Company Company Address Company state1 Company state 2 Ship name Ship Address Ship state1 Ship state 2

ORDERID	ORDERDATE	WEIGHT	SHIPNAME	SHIPCITY
1	2021-07- 30T12:27:37.66644	23.0	Kshitij-1	Nadiad
2	2021-07-	24.0	Kshitij-2	Nadiad
3	30T12:27:37.66644 2021-07-	25.0	Kshitij-3	Nadiad
4	30T12:27:37.66644 2021-07-	1 26.0	Kshitij-4	Nadiad
5	30T12:27:37.66644 2021-07-	1 27.0	Kshitij-5	Nadiad
	30T12:27:37.666441			