1. DISTRIBUTOR INVOICE

1.1. CUSTOMER DETAILS

ID: 16

NAME: North Regional Distributor LOCATION: NORTH AMERICA LICENSE NUMBER: RDR1017

1.2. BILLING ADDRESS DETAILS

ADDRESS LINE 1: NOrthd ADDRESS LINE 2: northd CITY: NEWYORK CITY2

STATE: NEWYORK COUNTRY: USA ZIP CODE: 1233222

1.3. ORDER SUMMARY TABLE

Order Item ID	Quantity	Value
1	200000	400000
2	200000	400000
3	200000	400000
4	200000	200000
5	200000	200000

Total Price: 1600000

ORDER DATE(MM/DD/YYYY): 12-07-2014

BILL GENERATED BY: Laksh