

INVOICE

Your Company Name

Address Line 1

Address Line 2

Phone: 9876543210

Email: support@company.com

Bill To:

sarathsambasivan@gmail.com

Mobile:

Invoice No: 35

Order Date: 23-11-2025

Payment Status: Paid

| Description | Qty | Price | Amount |
|-------------------------|-----|-------|--------|
| Anti-Hair Fall Hair Oil | 8 | 120.0 | 960.0 |

Subtotal: 960.0

Tax (0%): 0

Total: 960.0

*Thank you for your purchase!**If you have any questions, contact us at support@company.com*