

## INVOICE

## VACCIT AB

Österögatan 1  
16440 KISTA

Website : www.VASSIT.se  
E-mail : info@vassit.se  
Phone : 0850164494  
Momsreg.nr : SE556829899501  
Bankgiro SE556829899501

**Buyer :****Referens :** Salman Aleem**Dröjsmålsränta :** Enligt lag**Address :** Lindblomsvagen 98

ronneby

Tel

37240

SWEDEN

|                  |            |
|------------------|------------|
| Faktura Nummer : | 10         |
| Fakturadatum :   | 2014-05-05 |
| Förfallodatum :  | 2014-05-15 |
| Currency :       | USD        |

| Sl. No. | Text               | Timmer | A-Pris | Pris exkl. moms | Momssats |
|---------|--------------------|--------|--------|-----------------|----------|
| 1       | Package: Premium_3 | 1      | 299    | 299             | 25%      |
| 2       | Invoice Cost       | 1      |        |                 | %        |
|         |                    |        |        | Att betala :    | 374      |

## Momsspecifikation

| Moms | Pris exkl. moms | Moms i kr | Öresav-rundning | Summa |
|------|-----------------|-----------|-----------------|-------|
| 25%  | 299             | 74.75     | 0.25            | 374   |

Total Amount :

|  |     |     |
|--|-----|-----|
|  | USD | 374 |
|--|-----|-----|

Payment Information :  
Please make cheque payments payable to :  
**VACCIT AB**

The Invoice is payable within 10 days of issue.

E & O.E.  
For VACCIT AB

Authorised Signatory