

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 :** Rameen Grameen**Dröjsmålsränta :** Enligt lag**Address :** INMID

Österögatan 1

Kista

Mob: 0704443162

SWEDEN

| | |
|------------------|------------|
| Faktura Nummer : | 12 |
| Fakturadatum : | 2014-09-01 |
| Förfallodatum : | 2014-09-11 |
| Currency : | USD |

| Sl. No. | Text | Timmer | A-Pris | Pris exkl. moms | Momssats |
|---------|---------|--------|--------|-----------------|----------|
| 1 | Premium | 1 | 299.00 | 299.00 | 25% |
| | | | | 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 |
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