Your Company Name

INVOICE

123 Your Street, Your Town Address Line 3

2019-07-31 Invoice #INV-1004 Att: d

(+91) 1111111111 test@example.com

Dear d

Please find below a cost-breakdown for the recent work completed. Please make payment at your earliest convenience, and do not hesitate to contact me with any questions.

Many thanks,

Your Name

#	Items	Qty	Unit Price	Total (INR)
1	Test product 1	15	2,400.00	36,000.00
2				-
3				-
4				-
5				-
Subtotal:				36,000.00
Discount :				- 20.00
service tax (15%):				+ 5,400.00
Tax 2 (12%) :				+ 4,320.00
Total:			45,700.00 (INR)	

PAYMENT TERMS AND POLICIES

Lorem ipsum dolor sit amet, consectetur adipisicing elit. Veritatis aspernatur vero veniam magnam voluptatibus ipsum,

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