

Your Company Name

123 Your Street,
Your Town
Address Line 3
(+91) 1111111111
test@example.com

INVOICE

29-07-2019
Invoice #INV-1018
Att: abc

Dear abc

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	Testing product	10	1,500.00	15,000.00
2				-
3				-
4				-
5				-
Subtotal :				15,000.00
Discount :				- 50.00
SGST (15%) :				+ 2,250.00
CGST (12%) :				+ 1,800.00
IGST (12%) :				+ 1,800.00
Total :				20,800.00 (INR)

PAYMENT TERMS AND POLICIES

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