

# Your Company Name

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

# INVOICE

29-07-2019  
Invoice #INV-1020  
Att: pppp

Dear pppp

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	20	1,500.00	30,000.00
2				-
3				-
4				-
5				-
Subtotal :				30,000.00
Discount :				- 200.00
SGST (15%) :				+ 4,500.00
CGST (12%) :				+ 3,600.00
IGST (12%) :				+ 3,600.00
Total :				41,500.00 ( INR )

## PAYMENT TERMS AND POLICIES

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