

Lawyer Name / Law Firm**Name:Check Check**

Address: ,

Phone :8017357031,

Email : check.check@gmail.com,

Bar Association Name :

Bar Council Regn No : check100

Bill To :**Check Check2**

, Andhra Pradesh , Adilabad

INVOICE

Invoice No. :**Documentation/1318//27/01/20:****Invoice Date : 27/01/2020**

#	Particulars	Amount(Rs)
1	Job -	200.00/-
Grand Total		200.00/-
Amount Rs. Words: Rupees two hundred only		

PAN No. :**Bank account details :****Account holder name :****Account No. :****RTGS/ IFSC Code :****Bank Name & Address :****Authorized Signatory****Facilitated by**

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