

Lawyer Name / Law Firm Name:

Phone ;

Email ;

Bar Association Name :

Bar Council Regn No :

Bill To :**suman kumar**

Andhra Pradesh , Adoni

INVOICE

Invoice No. : LK240626/0000823**Invoice Date : 26/06/2024**

#	Particulars	Amount(Rs)
1	Test title -	700.00/-
Grand Total		700.00/-
Rupees seven 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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