

Dr Paws Animal Hospital

Address Line 11, Address Line 2, City, Country - 0123456

INVOICE

Bill To

test T{S

11111@tps.com

01022700962

| | |
|----------------|--------------|
| # | INV-00405 |
| Invoice Date | 19-10-2022 |
| Due Date | 19-10-2022 |
| Due Amount | £0.00 |
| Payment Method | Cash payment |
| Status | Paid |

| Item & description | Qty | Unit Cost | Tax | Price |
|--------------------|-----|-----------|-----|-------|
| ??? | 1 | £1 | | £1.00 |

Sub Total **£1.00**Tax **£0.00**Discount **£0.00**Paid **£1****Total £1.00****Customer Note**

It's great to work with you.

Terms & Conditions

Please pay us your amount in 15 days. Otherwise 12% interest will be applied.