

COMPANY NAME**TRAVEL SERVICES INVOICE**

Address line1 invoice no: invoice date:

Address line2 customer Name:

Address line3 address line1

Ph no: address line2

Fax: address line3

Email: ph no:

Deposit received: invoice total: total amount due:

Destination	Travel date	No of travelers
Tax1	Valsad	356562

Service	Description	Amount per traveler	Total amount
Tax1	Valsad	50	500
Tax2	Valsad	60	600
		Sub total	
		Tax	
		Total	1000

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