

PAYMENT RECEIPT

BlindMatrix

Temple Tower CIT Nagar West Anna
Salai, Nandanam
Chennai, Tamilnadu, Tamilnadu
P: 9940258697
E: test2@blindmatrix.com

Invoiced To:

HapQuote 14
Quote 14
Quote 14
Ph: 05454

Shipped To:

HapQuote 14
Quote 14
Quote 14
Ph: 05454

Invoice Number:

Invoice Date:

Job Number:

Customer Ref:

JBN704

Payment Date	Payment No	Payment Type	Payment Method	Payment Surcharge	Payment Amount
29-01-2025	324	Deposit	stripe	25.00	222.08
Total:					222.08