

Business Name

ESTIMATE

Address Line 1

Address Line 2

Address Line 3

Email

Mobile

Telephone

Fax

Website

Tax label: Tax no

Bill To:

Client name

contact name(optional)

Address Line 1

Address Line 2

Address Line 3

[contact](#)

Email

Mobile

Telephone

EST NO :

EST-001

Date :

DD,MMM,YY

PO NO :

PO NO

Ship Date	Ship Amt	Ship Via	Track	Fob
DD,YY,MM	₹ 0.00	Eg.truck	Eg. #12345	FOB

Sl.	Description	Qty	Rate	Amount
1	Item 1	1	₹ 0.00	₹ 0.00
2	Item 2	1	₹ 0.00	₹ 0.00
3	Item 3	1	₹ 0.00	₹ 0.00

Payment Instructions

Pay Cheque to

Cheque To (Business Name/
person)

Send to bank

Bank Details [AccNO,ifsc,swift]

Via Paypal

Paypal email :

Via Wallet

Wallet

Additional Details

Additional Details

Terms

Terms

Subtotal

0.00

Discount(0%)

0.00

Tax(0%)

0.00

Total

0.00

Paid

0.00

Balance Due

0.00

Notes

Notes

Signature

Authorized Signatory

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