Invoice Number:
INV-0001

TAX INVOICE

Bill To:

Participant Name:
NDIS No:
Email:

Invoice date: 01 Jan 2025

From:

Your name
Your address
Post Code
AUSTRALIA
ABN: 00000000000

Description	Qty	Price	Total
Item No: NDIS ITEM NAME Date of service	3	$ 60.00	$ 180.00
Item No: NDIS ITEM NAME Date of service	5	$ 60.00	$ 300.00

TOTAL AUD	$ 480.00

Payment Information:

Your name: Claire T
BSB: 060 000
Account No: 8000 0000

Further enquires:
Your email: claire@webmail.com
Your phone: 04*********