

Assessment Consultant Invoice

Date:

From: Name:

 Address:

 Email: GST No:

Bank Account Number for direct credit of payment:

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| Invoice Number: Assessment Date: Property assessed: Host(s) Name(s): Address: Assessment Fee: New Host ($50) $  or Current Host ($40) $ Number of kilometres travelled: @ 72 cents per km equals $ Accommodation: (*prior approval & receipts required*) $  Total $  |

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Summary of Invoices Page 1: Invoice No. $

 Invoice No. $

 Sub Total $

 GST (if registered) $

 Total Owing Page 1 $

Please email invoices with the completed Assessment Schedule:

Janet Dixon, Assessment Coordinator

e. anchordownbbpictonnz@gmail.com

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Summary of Invoices Page 2: Invoice No. $

 Invoice No. $

 Sub Total $

 GST (if registered) $

 Total Owing Page 2 $

TOTAL OF PAGES 1 & 2 Page 1 $

 Page 2 $

 Total Owing $

Please email invoices with the Assessment Schedule to:

Janet Dixon, Assessment Coordinator

e. anchordownbbpictonnz@gmail.com