



South Eastern Counselling and Psychology

TAX INVOICE 0027

21/09/18

ROS DELRAYNE
ABN: 65587357340
94 HIGH STREET
BERWICK VIC 3806

<u>Date</u>	<u>Service Provided</u>	<u>Fee</u>
Berwick Sat 15 th Sept	Room Rental (Half Day)	\$150.00
Berwick Mon 17 th Sep 2018	Room Rental (Full Day)	\$200.00
Berwick Thurs 20 th Sep 2018	Room Rental (Full Day)	\$200.00
Subtotal		\$550.00
GST		\$ 55.00
Total of this Invoice		\$605.00

PLEASE PAY YOUR INVOICE USING THE INV NO. AS A REFERENCE WITHIN 2 BUSINESS DAY TO:

ACCOUNT NAME: JOHN JAKUPI
BSB: 013 542
ACCOUNT NO. 457 002 671

45 Rogers St Pakenham 3810	63A High St Cranbourne 3977	8/418 Princes H/way Narre Warren 3805	6/94 High St Berwick 3806
Phone – 03 59 405 445	Phone – 03 59 954 557	Phone – 03 8786 5809	Phone – 03 9769 7118
Fax – 03 59 405 447	Fax – 03 59 954 559	Fax – 03 8786 5810	Fax – 03 9707 0679

Po Box 526 Berwick 3806
ABN – 56 922 385 514