## **INVOICE**

**INVOICE TO:** 

Sanlam Life Insurance

**Date:**21 S

Invoice No:
BILL\_000058779Z

Description		Amount
Event		9630.64
Event		9630.64
Event		9630.64
Payment Method	Sub-Total	4990677.0

**Total** 

## **Terms and Conditions**

Bank Name: NedBank AccountNo:

81983772

Please send payment within 30 days of receiving this invoice. There will be 10% interest charge per month on late invoice.

**Diluc Steiner** 

558878

Administrator