

TENNIS SCHOOL ADDRESS  
PHONE AND FAX NUMBER SCHOOL  
SCHOOL EMAIL ADDRESS

To: **md. hasan uddin**  
s45 , h43  
lcok, p12

Invoice Date 2015-01-13  
**Invoice Number 14211635150**  
Relationship Number  
Season ---

Description		Rate	VAT
<b>Lesson / Training</b>			
<b>TRAINEE NAME</b> student concerns.			
* Type	Youth Training	€ 375.00	6.00
* Group	1		
* Period	<b>November to March</b>		
* Match day and time	<b>DAY OF LESSON</b> van <b>START TIME</b> tot <b>END TIME</b> ; TENNIS LANE LOCATION NAME, LOCATION ADRES, LOCATION ZIPCODE + CITY		
* Maximum students	8 own review of trainees		
* Number of lessons	<b>22</b>		
Subtotal excluding VAT		€ 375.00	
Subtotal 6% VAT		€ 22.5	
<b>TOTAL TO PAY</b>		<b>€ 397.5</b>	

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