

**Advance Rehab Centre PTY LTD**

ABN: 64 132 614 414

5 George Place, Artarmon

NSW 2064

T: 02 9906 7777

E: artarmon@archealth.com.au

W: www.archealth.com.au

TAX INVOICE

To: Altido Consulting Services PO Box 295 Toongabbie, NSW 2146	Invoice Date	14/11/2023
	Invoice No	INVARC160418
	Condition	Parkinsons disease

Client Information

Name	John Watkins	Reference No	431537956
-------------	---------------------	---------------------	------------------

Referrer Information

Referrer Name	Manoj Sheoran	Provider No	N/A	Referral Date	N/A
----------------------	----------------------	--------------------	------------	----------------------	------------

		Date	Code	Description	Provider	Price	Qty	Discount	GST	Total
1190023	-	14/11/2023	15_200_0126_1_3	NDIS IDL Exercise Physiology Group Class 60-minutes	Erica Molloy 6080282H	55.66	1.00	0.00	0.00	55.66
<input type="radio"/> Unpaid <input type="radio"/> Part Paid <input checked="" type="radio"/> Paid in Full										
INVOICE TOTAL										0.00
										55.66

Notes

Thank you for your business

Transactions	Date	Amount
No payment has been made		

Balance	55.66
----------------	--------------

Payment terms 24 Hours**Direct Deposit****Bank: NAB****BSB: 082 212****Acc: 82 443 6317****Reference: Please use Invoice Number****Cheques payable to Advance Rehab Centre****Credit card payments can be made by calling the office**

Invoice # 55

Name: Thirumal subramaniyam

NDIS No: 431288127

Service details: 06.11.2023 to 12/11/2023

06.11.2023: Monday

2 hours of assistance with self-care activities

(01_011_0107_1_1) (\$54.47x2) = \$ 110.94

07.11.2023: Tuesday

3 hours of Community participation:

(04_106_0125_6_1):(\$55.47 X 3) =\$ 166.41

09.11.2023: Thursday

2 hours of assistance with self-care activities

(01_011_0107_1_1) (\$54.47x2) = \$ 110.94

11.11.2023: Saturday

2.5 hrs of Daily activity (01_013_0107_1_1) (\$80.10 x2.5) = \$ 200.25

12.11.2023: Sunday:

3 hrs of daily activity: (04_106_0125_6_1)(\$100.16 X 3) =\$ 300.48



Provided By: Sarah Van de Velde
ABN: 23 602 276 120
Address: Level 1, 41 Court Road
Fairfield NSW 2165
Email: info@psychorium.com
Phone: (02) 8772 9559

Invoice To: Altido Consulting Services
(Manoj Sheoran)
Address: PO Box 295
Toongabbie NSW 2146
Australia

For bank transfers please use the following details:

Name: PsychOrium
Bank: National Australia Bank
Branch: Marrickville
BSB: 082-356
Account: 73-026-7591

Provided To: Anthony Cremona
Appointment: 13/11/2023 12:00 PM

Tax Invoice: 9675
Date: 13/11/2023

Mailing Address: PO Box 20, Manahan, NSW,
2200

Please make payment using PayID:
info@psychorium.com and reference your invoice
number to ensure payment is recorded correctly.

Items

Date	Qty	Code	Item Name & Description	Price	GST	Total
13 Nov 2023	1.00	15_054_0128_1_3	Individual Therapy - NDIS (Telehealth)	\$214.41	\$0.00	\$214.41
					Total GST	\$0.00
					Invoice Total	\$214.41

Payments

Date	Payment Method	Received
Total Paid		\$0.00
Balance Owing		\$214.41



TAX INVOICE

Ayaana HAQUE
6 Mulvihill Crescent
DENHAM COURT NSW 2565
AUSTRALIA

Invoice Date
13 Oct 2023

Invoice Number
18739

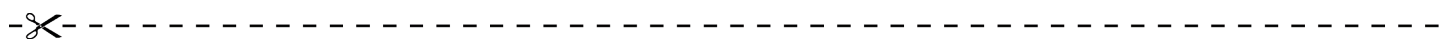
ABN
26 644 682 155

Olive Tree Therapy Pty
Limited
PO Box 474
LIDCOMBE NSW 1825
AUSTRALIA
Email:
accounts@olivetreetherap
y.com.au
Phone No.: 0436 289 634

Description	Quantity	Unit Price	GST	Amount AUD
1hour STAN TAL2 F2F - 15_053_0128_1_3, Therapy Assistant - Level 2	1.00	86.79	GST Free	86.79
0.96hours TAL2 NF2F - 15_053_0128_1_3, Therapy Assistant - Level 2	1.00	83.21	GST Free	83.21
Subtotal				170.00
TOTAL AUD				170.00

Due Date: 13 Oct 2023

Bank Details -
Olive Tree Therapy Pty Limited
BSB : 062 194
Account Number: 1071 9882



PAYMENT ADVICE

Customer Ayaana HAQUE
Invoice Number 18739
Amount Due **170.00**
Due Date 13 Oct 2023

Amount Enclosed

Enter the amount you are paying above

To: Olive Tree Therapy Pty Limited
PO Box 474
LIDCOMBE NSW 1825
AUSTRALIA
Email: accounts@olivetreetherapy.com.au
Phone No.: 0436 289 634