

INVOICE

Tony
1 Ynot St
Trance, AB 300
Around the World

tony@example.com

DATE	INVOICE NO.
2022-05-10	42
TERMS	DUE DATE
30	2022-06-10

BILL TO	
Jono 1 Onoj St Trance, AB 300 Around the World	jono@example.com

PROJECT	group-therapy
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PRODUCT	QUANTITY	UNIT COST	SUBTOTAL	CREDITS	TOTAL
Week 1	1	\$11.00	\$11.00	-\$0.50	\$10.50
Week 2	1	\$11.00	\$11.00	-\$0.50	\$10.50
Week 3	1	\$11.00	\$11.00	-\$0.50	\$10.50
Week 4	1	\$11.00	\$11.00	-\$0.50	\$10.50

PAYMENT OPTIONS:

International payments: Make payments in your local currency via bank transfer or credit card by following this link: <https://wl.flywire.com/?destination=DMG>

Credit card payments (USD) can be made online here:
<http://server.local/a/group-therapy/settings/project/billing/statements/>

ACH or Wire: If you make payment via ACH or Wire, please make sure to email bills@example.com so that we can match your payment to the correct invoice. Please include: Invoice No., Project Space, and payment date in the email.

ACH payment (preferred over wire payment for transfer in the US):

Bank: \$ Bank Address: Paavo 1 Ovaap St Trance, AB 300 Around the World
paavo@example.com Account Number: 123 Routing Number or ABA: 456

Wire payment:

Bank: \$ Bank Address: Paavo 1 Ovaap St Trance, AB 300 Around the World
paavo@example.com Account Number: 123 Routing Number or ABA: 789 Swift
Code: ---

Subtotal: \$42.00

Tax (6.00%): \$2.52

Credit: -\$20.00

Total: \$24.52

Thank you for using CommCare HQ.