

INVOICE

INVOICE: **30**
DATE: 03-Dec-2019

To :
Accounts Department
meenu
sfg
BRITISH COLUMBIA

For : hh fsgjhfdkjin hbitkue brftgytbiuyg biusba tias
ghd
PHYSIO
ONE ON ONE
STAFF PROVIDED FOR 01-Jan-2019 to 31-Dec-2019

Caregiver Name	Date	Time In	Time Out	Description	Hrs	Rate	Amount
Amig a	11/28/2019	02:00 AM	04:00 AM	hh fsgjhfdkjin hbitkue brftgytbiuyg biusba tias ghd	2.00	\$ 50.00	\$ 100.00
Total							\$ 100.00
HST							\$ 0.00
Amount Due							\$ 100.00

240 Duncan Mill Rd, Ste 501,
ONTARIO, M3B 3S6, CANADA
Tel : 1 416 960 1042

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Thank you For Your Business !