

INVOICE

INVOICE: **66** DATE: 26-Jun-2019

To:Accounts Department **Nira**amstor
ALBERTA

9874563210

For:

RPN ESCORT

STAFF PROVIDED FOR June, 2019

Caregiver Name	Date	Time In	Time Out	Hrs	Rate	Amount
Freda Somuah	6/22/2019	08:00 PM	08:00 AM	11.50	\$ 30.00	\$ 345.00
	'		'		Total	\$ 345.00
					HST	\$ 1.73
				A	mount Due	\$ 346.73