



## INVOICE

INVOICE: **AVR- 150775**

DATE: 04/08/2020

**To :**

Advent Valley Manager

**ADVENT VALLEYVIEW RESIDENCE**

541 FINCH AVE WEST

ONTARIO

4163980555

**For : 261**

PSW

ONE ON ONE

STAFF PROVIDED FOR 01/01/2020 to 12/31/2020

Caregiver Name	Date	Time In	Time Out	Description	Hrs	Rate	Amount
Camila Miranda De Azevedo Souza	1/19/2020	03:00 PM	11:00 PM	261	7.50	\$ 25.00	\$ 187.50
Camila Miranda De Azevedo Souza	1/30/2020	09:00 AM	03:00 PM	261	6.00	\$ 25.00	\$ 150.00
<b>Total</b>							<b>\$ 337.50</b>
<b>HST</b>							<b>\$ 43.88</b>
<b>Amount Due</b>							<b>\$ 381.38</b>

240 Duncan Mill Rd, Ste 501,  
ALBERTA, M3B 3S6, CANADA  
Tel : 1 800 892 6066

info@tranquilcare.ca  
www.tranquilcare.ca

Thank you For Your Business !