

To: qwe q CALGARY ALBERTA CANADA

INVOICE

INVOICE: 36

DATE : 23-May-2019

Service Name	Caregiver	Booking Date	Start Time	End Time	Hrs	Rate	Тах	Total Amount
PHYSIOTHER APY	care giver	23-May-2019 03:56 AM	29-May-2019 12:00 AM	29-May-2019 12:30 AM	0.50	\$ 30.00	\$ 0.08	\$ 15.08

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