



To :
qwe q
CALGARY
ALBERTA
CANADA
M6L 1C4

INVOICE

INVOICE : **24**
DATE : 22-May-2019

| Service Name | Caregiver | Booking Date | Start Time | End Time | Hrs | Rate | Tax | Total Amount |
|---------------|------------|----------------------|----------------------|----------------------|------|---------|---------|--------------|
| PERSONAL CARE | Karen Noel | 22-May-2019 09:38 AM | 27-May-2019 04:30 AM | 27-May-2019 05:00 AM | 0.50 | \$ 0.00 | \$ 0.00 | \$ 0.00 |

240 Duncan Mill Rd, Ste 501,
TORONTO, ONTARIO,
M3B 3S6, CANADA
Tel : 416 960 1042
Email : info@tranquilcare.ca

Thank you For Your Business !