

# Tax Invoice

Date: 06 Aug 2015  
Created By: James Moors  
Branch: Tingalpa, QLD

ETD	Ref ASTE37762-1	Tax Invoice No 5317	Customer Ref
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**Customer:**  
ATTN: Anita Stevenson

Phone:

**Ship To:**  
1084 Pine Mountain Road  
Pine Mountain

Code	Item	Options	Qty	Disp. Qty	Unit Price	Unit Discount	(AUD) Sub Total
YA-RXA740B	Yamaha AV RECEIVER RXA740BTSerial(s), 21Y223594WY		1	1	\$1,399.00	\$399.00	\$1,000.00
AL-P7291	Altronics CABLE - INTERCONNECT P7291		1	1	\$29.00		\$29.00

Product Cost: \$1,029.00

Surcharge: \$0.00

Delivery Details: \$0.00

Sub Total: \$1,029.00

GST: \$93.55

**Tax Invoice Total:** (AUD) \$1,029.00

Payments	Method	Ref	Amount
09 May 2015	EFTPOS		\$1,029.00

**Total Paid:** (AUD) \$1,029.00

**Outstanding:** (AUD) \$0.00

<b>Bank Details:</b>	<b>CBA</b>	<b>Account name:</b> Guleo Pty Ltd T/as Todds Hi Fi	<b>Account Number:</b> 064-133 10264066
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**Todds Hi Fi**  
www.todds.com.au  
ABN Number 15 571 721 561

**Tingalpa Store**  
1/308 New Cleveland Road,  
Tingalpa,  
QLD 4173,  
Australia  
07 3907 7778  
tingalpa@todds.com.au

**Virginia Store**  
CNR Sandgate & Pritchard Rds  
Virginia  
QLD, 4014,  
Australia  
07 3637 5777  
virginia@todds.com.au

***TODD'S USE ONLY***	
Customer Code	
Salesperson	
Order Number	



## System Supply Agreement

THIS AGREEMENT is made on Date        /        /20

**BETWEEN: GULEO PTY LIMITED t/as Todd's Hi Fi** ABN 15 571 721 561 of 1/308 New Cleveland Road, Tingalpa Qld 4173

AND: Customer Name .....

Of Address .....

I enter into this Agreement with Todd's Hi Fi on the terms and conditions contained herein and overleaf.

TOTAL Price Inc GST            \$    

Deposit        \$

Payment Inc GST        \$        due        /        /20        (Minimum 3 days prior install)

Payment Inc GST        \$        due        /        /20        (On day of Install after sign off)

**\*\*Handover of system/controls to occur once all payments have been finalised.**

SIGNED by Owner of Property:

Name: ..... Sign: ..... Witness: .....

SIGNED by **TODD'S Hi Fi**:

Name: ..... Sign: ..... Witness: .....

### Credit Card Authorization

Account Type:        ☐ Visa        ☐ MasterCard        ☐ AMEX (Subject to 1.9% Surcharge)

Cardholder Name .....

Account Number ..... Expiry Date .....

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for the terms stated above only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

**www.Todd's.com.au • sales@Todd's.com.au**

1/308 New Cleveland Rd, **Tingalpa** QLD 4173  
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