

✉ PO Box N195
CAMBERWELL
VIC, 3124

@ accountsreceivable@regis.com.au

☎ 1300 998 100

Simon Sample
3 Sample Street
Sampletown SAMPLE 123456789
Australia

Direct Debit N

Fees Statement / Tax Invoice

Your account				Total Amount Due
Customer Code	SAMP022H	Invoice Number	SAMP022H-310325	\$65.00
Client	Simon Sample	Invoice Printed	05/03/2025	
Location	HC EASTERN	Account Period	01/02/2025 to 31/03/2025	

Details	Date Period	No of Units	Rate per Unit	GST	Total (inc GST)
Balance Brought Forward					\$0.00
Cash Receipts					
Lawn mowing 4/3/25		1	\$65.00	\$5.91	\$65.00
Total (inc GST)					\$65.00
Total Due					\$65.00



Telephone & Internet Banking – BPAY®

Contact your bank, credit union or building society to make this payment from your cheque, savings or credit card account.

More info: www.bpay.com.au

All other payments please remit to

REGIS AGED CARE PTY LTD
PO Box N195
CAMBERWELL
VIC, 3124

Please Note

Direct Debits will be processed on the 1st work day of each month.

Remittance advice

Invoice Number	SAMP022H-310325
Due Date	08/02/2025
Customer Code	SAMP022H
Client	Simon Sample
Amount Due	\$65.00