

TAX INVOICE

All Day All Night Dental
1143 Botany Road
MASCOT NEW SOUTH WALES 2020
AU

Invoice Date
6 Jun 2024

Invoice Number
38290 / 28171

Reference
28175

ABN
45 609 852 299

Healthware Aus Pty. Ltd.
Unit 1, 4 Forge Place
NARELLAN NSW 2567
1300 542 546

Item	Description	Quantity	Unit Price	GST	Amount AUD
	Sterin-Trace 2-Line Label with Type 4 Steam Indicator Violet to Green - 750 Labels (MJ6024019000)	12.00	35.00	10%	420.00
	Baxter Sodium Chloride (Saline) 0.9% For Irrigation Bag - 1000ml (BXTAHB1324)	6.00	4.90	10%	29.40
	DentaMedix K Files 25mm 6/Pack - #15 (DMKF1525)	6.00	6.50	10%	39.00
	DentaMedix K Files 31mm 6/Pack - #15-40 (DMKF154031)	2.00	6.50	10%	13.00
	DentaMedix K Files 25mm 6/Pack - #20 (DMKF2025)	2.00	6.50	10%	13.00
	DentaMedix K Files 21mm 6/Pack - #20 (DMKF2021)	2.00	6.50	10%	13.00
	DentaMedix Tray Sleeve 500/Box - Small (26.7cm x 35.6cm) (DMTS1)	10.00	21.90	10%	219.00
			INCLUDES GST 10%		67.85
			TOTAL AUD		746.40
			Less Amount Paid		746.40
			AMOUNT DUE AUD		0.00

Due Date: 31 Jul 2024

Bank Transfer Details:

Account Name: HEALTHWARE AUS PTY. LTD.

BSB: 062-116

Account Number: 1039 4158

Reference: Please quote account name or invoice number



PAYMENT ADVICE

To: Healthware Aus Pty. Ltd.
Unit 1, 4 Forge Place
NARELLAN NSW 2567
1300 542 546

Customer	All Day All Night Dental
Invoice Number	38290 / 28171
Amount Due	0.00
Due Date	31 Jul 2024

Amount Enclosed

Enter the amount you are paying above