

# TAX INVOICE

**[ENTER COMPANY NAME]**

**ABN: [ENTER ABN]**

**ACN: [ENTER ACN]**

**INVOICE NUMBER:** [enter invoice number]

**INVOICE DATE:** [enter date]

**WEEK ENDING DATE:** [enter date]

**Attention Payroll:**

**Global Medics Pty Ltd**

ABN: 61 122 582 183

Level 7, 14 Martin Place Sydney NSW 2000

Email: [payroll@globalmedics.com.au](mailto:payroll@globalmedics.com.au)

**Invoice Details: Locum Services for Dr [enter first and Surname]**

Name of Hospital	Standard Rate		Overtime Rate		Approved Expenses (AUD)	Net Amount (AUD)
	Number of Hours or Days Worked	Rate (AUD)	Number of Hours or Days Worked	Rate (AUD)		
		\$		\$	\$	\$
<b>Net Amount (AUD)</b>						\$
<b>GST (AUD)</b>						\$
<b>Total Amount (AUD)</b>						\$

**Bank Account Details for Payment**

Bank Name: [enter bank name]

Name on Bank Account: [enter name of bank account]

BSB Number: [enter number]

Account Number: [enter number]

Swift Code (international bank accounts only): [enter number]

Name: [enter name]

Signed: \_\_\_\_\_