**Invoice**

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| --- | --- |
| **Invoice to:**  | Ministry of Social DevelopmentPO BOX 1556 Wellington 6140 |
| **Invoice from:** |  |
| Name  |  |
| Address Details  |  |
| Email Address  |  |

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| --- | --- |
| **Date**  |  |
| **Invoice Number**  |  |
| **Reference**  | Community Support Fund  |

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| --- | --- | --- | --- |
| **Description**  | **Quantity**  | **Unit Price**  | **Amount NZD**  |
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| **Subtotal**  |  |
| **Total NZD** |  |

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| **Payment can be made to** |
| **Name of Bank** |  |
| **Name of Account Holder** |  |
| **Bank Account no**  |  |

**Not GST Registered**