Irene Fake INVOICE

Behaviour Interventionist

1234 56th Ave DATE: 01-Aug-2011

Vancouver, BC V1N N1N

Invoice # 1

Client Name (Child): Jon Jones

BILL TO: PAYMENT DUE: 10-Aug-11

Autism Funding Unit

Ministry of Children and Family Development **Billing #** (from AFU) APH*******

PO Box 9776 STN PROV GOVT

Victoria BC V8W 9S5

Fax: 250-356-8578 Email: mcf.autismfundingunit@gov.bc.ca

Date of Service	Description of Service	Hours	Hourly Rate	Amount
01 January 2012	Behaviour Intervention	2.00	\$10.00	\$20.00
L		1	TOTAL	\$20.00

Make all cheques payable to Irene Fake					
Signature of Parent (if required)					