

## TAX INVOICE

**Invoice #** 11900/PO9356    **Invoice Date :** 12 Oct 2020

Invoice To:

Pippa Robertson  
Boathire Sydney

| BOOKING REF. NO    | INVOICE NO  | DUE DATE          | PG. |
|--------------------|---|-------------------|-----|
| 11900              | 11900/PO9356  | 19/10/2020        | 1   |
| <b>Description</b> | Aussie Magic<br>Private Charter<br>Saturday, 09 January 2021<br>06:00 PM to 10:00 PM<br>Deposit Invoice | <b>ITEM TOTAL</b> |     |
|                    |   | \$0.00            | GST |
|                    | SALE AMOUNT   | \$1,818.18        |     |
|                    | GST   | \$181.82          |     |
|                    | TOTAL INC. GST  | \$2,000.00        |     |
|                    | BALANCE DUE   | \$2,000.00        |     |

ALL OCCASION  
CRUISES  
*Always welcome aboard!*

Booking Name: \_\_\_\_\_  
Booking Date : \_\_\_\_\_  
Ref Number : \_\_\_\_\_ (Please ensure you put your booking reference number here)  
Amount : \_\_\_\_\_

**PAYMENT METHODS**

| <b>IN PERSON</b>  | <b>CREDIT CARD</b>  | <b>CHEQUE OR \$\$ ORDER</b>  | <b>DIRECT DEPOSIT</b>   |
|---|---|--|---|
| Come into our office at<br>37 Bank Street<br>PYRMONT NSW 2009 | Complete form below and email to<br>info@aocruises.com.au | Post with this form to<br>All Occasion Cruises<br>PO BOX 1256<br>Broadway NSW 2007 | Bank: National Australia Bank<br>Name: All Occasion Cruises<br>BSB: 082-204<br>Acc# :54915 5317 |

**REMEMBER TO EMAIL CONFIRMATION OF THE DEPOSIT TO YOUR EVENT MANAGER OR [info@aocruises.com.au](mailto:info@aocruises.com.au)**

All Occasion Cruises will hold these details for up to 2 days after the event as a bond should there be additional charges on your charter e.g. additional hours, bar tabs, additional passengers etc.

**PLEASE NOTE:** Credit Card payments over \$100 incur a surcharge of 2.5% for Visa, MasterCard, Bankcard, American Express and Diners club.

|   |  |     |     |
|---|--|-----|-----|
| I Authorise All Occasion Cruises to debit the following amount from my Credit Card. |  |     |     |
| Amount (Inc GST)  |  |     |     |
| TOTAL ( + Surcharge if applicable)  |  |     |     |
| VISA / MASTERCARD / BANKCARD - Please circle  |  |     |     |
| Card Number   |  | EXP | CVV |
| Name on Card  |  |     |     |
| Signature   |  |     |     |