

ABC Home Care
 123 Center Street
 Springfield, FL 33333
 555-444-6666

INVOICE: 9-1234
DATE: 11/18/2014

Tax ID: 99-123456
 License #: 1234567

Client:
 Joe Insured
 456 Main Avenue
 Springfield, FL 33333

NEW CHARGES

| Date | Service | Caregiver | Hours | Units | Rate | Charges |
|------------|-------------------------|------------------|------------------|-------|---------|----------|
| 11/10/2014 | HHA for 4 Hours or More | Smith, Josephine | 8:00AM - 8:00 PM | 12.00 | \$20.00 | \$240.00 |
| 11/11/2014 | HHA for 4 Hours or More | Smith, Josephine | 8:00AM - 8:00 PM | 12.00 | \$20.00 | \$240.00 |
| 11/12/2014 | HHA for 4 Hours or More | Smith, Josephine | 8:00AM - 8:00 PM | 12.00 | \$20.00 | \$240.00 |
| 11/13/2014 | HHA for 4 Hours or More | Smith, Josephine | 8:00AM - 8:00 PM | 12.00 | \$20.00 | \$240.00 |
| 11/14/2014 | HHA for 4 Hours or More | Smith, Josephine | 8:00AM - 8:00 PM | 12.00 | \$20.00 | \$240.00 |

New Charges: \$1200.00
 Total Amount Due: \$1200.00

Client Note: John Hancock Policy# 111222

SEE REVERSE FOR DETAILS

Invoice #: 9 – 1234
 Client: Joe Insured
 Invoice Date: 11/18/14
 Due Date: Upon Receipt
 Amount Due: \$1200.00

Please detach and return with payment. Make checks payable to:
 ABC Home Care
 123 Center Street
 Springfield, FL 33333

Total Enclosed _____

