



ILAC LABORATORY COMMITTEE
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Invoice No. LC 01-2014

INVOICE

Customer

Name Dr Toru Matsumura
Address UII
c/o IDEA Consultants, Inc.
Riemon 1334-5, Yaizu-City
Shizuko, 421-0212
City _____ **State** _____ **Pcode** _____
Country JAPAN

Date 31 January 2014

Date Due 30 April 2014

Item	Description	TOTAL
	LC Subscription Fee for the year 2014	AUD\$ 950.00
Please pay the exact amount in Australian Dollars with the invoice number by cheque or direct transfer to:		
Account Name : International Laboratory Accreditation Cooperation Bank : Commonwealth Bank Australia, Sydney Bank Address: 443 Victoria Avenue, Chatswood, NSW 2067 Swift Code : CTBAAU2S BSB: 062140 Account No. : 10250357		
TOTAL		AUD\$ 950.00

Payment Details

- Bank Transfer
 Cheque

Office Use Only

Early payment would be greatly appreciated