

Sample Collection Invoice

Invoice number

Sample collector details

INVOICE TO:

Crystal Health Group Limited
The Old Chapel
53 Peel Street
Manchester
M30 0NG

Date and tax point

Payment Terms:
15 Days from receipt of invoice

Case Reference

Test Description

Amount

VAT registration number (if applicable)

VAT (if applicable)

Total

Cheques made payable to

Cheques to be sent to (if different from above)


BACS payment details

Account name:

Account number:

Sort Code:

Please note: Any inaccuracies or discrepancies may lead to a delay in remittance. Please ensure you refer to the latest testing and sample collection fees.

	Version	Approval Date	Review Date
	v01.06.17	June 2017	June 2019