

INVOICE: 8005235

1234567 ALBERTA LTD.: SMITH, J.
MY RESTAURANT
111 MY STREET SW
CALGARY, AB T2G 2E6

Invoice: 8005235
Date Issued: 01/03/2009(DD/MM/YYYY)

Food Regulation Food Handling Permit

Premises: 0000001

Description	Total Due
Annual Permit Fee Class 1/2	100.00/175.00
Total Amount Due:	100.00/175.00

Terms: Net 30. Due 31/03/2009(DD/MM/YYYY)

GST# R124072513

Failure to meet this deadline can result in the Closure of your business.

Please direct inquiries to Environmental Health, Phone: 403-943-8053 or Fax: 403-303-6097

Please detach and return the bottom portion with your payment.

Business: 1234567 ALBERTA LTD.; SMITH, J.
111 1 ST SW
CALGARY, AB T2G 2E6

Premises Number: 0000001 Invoice: 8005235
Fee Class: 1/2
Total Due: 100.00/175.00
Statement Date: 01/03/2009(DD/MM/YYYY)

Payment enclosed in the amount of \$

Make cheque payable to: CALGARY HEALTH REGION

I authorize CALGARY HEALTH REGION to charge my:

VISA MASTERCARD AMEX

Name on Card _____

Card # _____

Expiry Date (month/year): _____

The amount of _____

Signature: _____