



PRIDE  
INCLUSION  
PROGRAMS



ABC

[PID-L20] REF-1582679549

Manda Hatter

Issued - 2020-02-26

Due - 7 Days after the Issued Date

700 Harris Street  
Ultimo NSW  
2007  
Australia

## Tax Invoice

<u>ITEMS</u>	<u>QTY</u>	<u>EACH</u>	<u>TOTAL</u>
Premium table (12) - \$4,504.50	1	\$ 4504.5	\$ 4504.5
<b>TOTAL AMOUNT (Incl. 10% GST)</b>			\$ 4504.5

## Terms & Conditions

Our full terms and conditions and your agreement with us are [available here](#).

Some of the important terms are set out below but you should always consult the full terms and conditions.



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Please add [finance@acon.org.au](mailto:finance@acon.org.au) to your address book or approved sender list.

**Quicklinks**

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**ABN**

38 136 883 915

**Our Address**

414 Elizabeth Street,  
Surry Hills NSW 2010

**Phone**

02 9206 2000

**Credit Card Payment**

Please click on the link below to process your payment.\*

**EFT Payment Details**

**Account Name:** ACON Health - Pride In Diversity

**Bank:** Commonwealth Bank

**BSB:** s 22(1)

**Account No:** s 22(1)

**\*Credit Card Payment**

s 22(1)

*Link not working? Please copy the full link above and paste onto your browser to proceed.*