

# CoolCare invoice templates.

Below are nine examples of various Coolcare templates, click on a template to view in more detail.

## Template 1 (available with or without logo)

		Home Name
Payee Name Account Address 1 Account Address 2 Account Address 3 Account Address 4 Account Postcode	<b>Invoice</b>	Invoice No: 1 Invoice Date: 01/02/2023 Account No: DMODOE01
<hr/>		
<b>Service Details</b> Respite Care Care for John Doe in Room 1 at Home Name for 28 days, from 01/02/2023 to 28/02/2023 Fees at £500.00 per week	Tax Code EX EX	Net Amount  £2,000.00
		Total Net: £2,000.00 Total Tax: £0.00 Invoice Total: £2,000.00
<hr/>		
Registered Office: Company Name, Company Address 1, Company Address 2, Company Address 3, Company Address 4, Company Postcode		

## Template 2 (available with or without logo)

		Company Name Company Address 1 Company Address 2 Company Address 3 Company Address 4 Company Postcode
Payee Name Account Address 1 Account Address 2 Account Address 3 Account Address 4 Account Postcode		Invoice: 1 Account Ref: DMODOE01
<hr/>		
<b>Description</b> Respite Care Care for John Doe in Room 1 at Home Name for 28 days, from 01/02/2023 to 28/02/2023 Fees at £500.00 per week		<b>Total</b> £2,000.00
<b>Total Amount Due</b>		<b>£2,000.00</b>
<hr/>		
Registered Office: Company Name, Company Address 1, Company Address 2, Company Address 3, Company Address 4, Company Postcode		

## Template 3

Company Name Home Name Home Address 1 Home Address 2 Home Address 3 POST CODE		
	Tel: Fax:	
Payee Name Account Address 1 Account Address 2 Account Address 3 Account Address 4 Account Postcode	<b>Invoice</b>	Invoice: 1 Invoice Date: 01/02/2023 Account Code: DMODOE91
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<b>Service Details</b> Respite Care Care for John Doe in Room 1 at Home Name for 28 days, from 01/02/2023 to 28/02/2023 Fees at £500.00 per week	Tax Code EX EX	Net Amount £  £2,000.00
		Total Net: £2,000.00 Total Tax: £0.00 Invoice Total: £2,000.00
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Registered Office: Company Name, Company Address 1, Company Address 2, Company Address 3, Company Address 4, Company Postcode		
1		

## Template 4

Home Name Home Address 1 Home Address 2 Home Address 3		Company Name
	Tel: 01234567890 Fax: 01234567890	
Payee Name Account Address 1 Account Address 2 Account Address 3 Account Address 4 Account Postcode		Invoice No: 1 Invoice Date: 01/02/2023
<hr/>		
<b>Description</b> Respite Care Care for John Doe in Room 1 at Home Name for 28 days, from 01/02/2023 to 28/02/2023 Fees at £500.00 per week		<b>Amount</b> £2,000.00
		Total Net: £2,000.00 Total Tax: £0.00 <b>Invoice Total: £2,000.00</b>
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Registered Office: Company Name, Company Address 1, Company Address 2, Company Address 3, Company Address 4, Company Postcode		
1		



Template 9 (with logo only)

	Caring East 11 Street Town City P65100E
William Campbell	Invoice No: 2 Invoice Date: 04/07/2022 Account No: CAECOL4
<b>Invoice</b>	
BAC	
<b>Service Details</b>	<b>Tax Code      Net Amount</b>
Residential Care for Andrew Barker in Room 5 at Caring East for 28 days, from 29/10/2014 to 25/11/2014 Fees at £100.00 per week	EX EX      £600.00
	Total Net:      £600.00 Total Tax:      £0.00 Invoice Total:    £600.00
BAC	
Registered Office: Caring Ltd	