



TO: FLIPPABALL COACHES INVOICE

OTAGO WATER POLO

Moana Pool

60 Littlebourne Road

Roslyn, Dunedin 9010

DATE :

COACH NAME :

EMAIL :

ADDRESS :

[Please send completed tax invoice to: flippaball@otagowaterpolo.com](mailto:flippaball@otagowaterpolo.com)

DATES	DESCRIPTION	NO. OF GAMES	RATE/HRS	AMOUNT
		0		\$ -
		0		\$ -
		0		\$ -
		0		\$ -
		0		\$ -
		0		\$ -
		0		\$ -
		0		\$ -
TOTALS (DO NOT INPUT)		0		\$ -
			INVOICE TOTAL	\$ -

BANK ACCOUNT DETAILS:

Flippaball Coaches Signature

I declare I am not GST registered and acknowledge that I am liable to declare any income received to the Inland Revenue Department for tax purposes.

