CTS LLC. CAUCASUS TRAVEL SERVICES

A Carlson Wagonlit Travel Representative

Carlson Wagonlit Travel® Representative

INVOICE *No:* *303/8/K* **Inv. Date:** **15-Aug-18**

Customer

Co. Name:	**Ministry of Health**
Resp. Person	
Fax No:	
City/Country	**Tbilisi/Georgia**

Reference

	Description	Price	Total
	Flight Tickets for David Sergeenko, Mrs.Sofiko Belkania **TBS-IST-FCO-IST-TBS by TK (SEP 15-20)**		
2	**Total**	**GEL 1075.30**	**GEL 2150.60**
	Exchange Rate 1 EUR=3.042 GEL		
		TOTAL	**GEL 2150.60**

Payment Details

- ☐ Cash
- ☑ Bank Transfer
- ☐ Credit Card

Bank transfer fees paid by: Sender ◉ Beneficiary ○

TOTAL AMOUNT TO BE PAID: **GEL : Two Thousand One Hundred Fifty, 60**

Please, transfer amount stated above to following Bank Account

მიმღები ბანკი	სს "ბაზისბანკი"
ბანკის კოდი	**220101956**
მიმღების დასახელება	ა/ა შ.პ.ს. "სითიეს"-ი
ანგარიშის ნომერი	**1836808**
IBAN	**GE89 BS00 0000 0001 8368 08**

- *Please arrange* ***transfer within five working days*** *after receiving invoice*
- *Please* ***confirm the transfer of money*** *by sending the bank remittance.*

THANK YOU FOR COOPERATION

Financial Controller
Ketevan Edilashvili

Responsible Operator
Keti Sakvarelidze

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