

VETERINARY CLINIC INVOICE

Invoice Number: 606773
Date: 2025-11-27 10:13:42
Owner Name: Emma Davis
Payment Method: Cash

Item/Service	Quantity	Unit Price	Total
Consultation Fee	1	\$56.96	\$56.96
Rabies Vaccine	1	\$50.00	\$50.00
Anti-Inflammatory	1	\$32.40	\$32.40

TOTAL: **\$139.36**