

VETERINARY CLINIC INVOICE

Invoice Number: 1202348
Date: 2025-12-03 10:14:00
Owner Name: Mary Johnson
Payment Method: Cash

| Item/Service | Quantity | Unit Price | Total |
|--------------------|----------|------------|---------|
| Consultation Fee | 1 | \$69.98 | \$69.98 |
| Parvovirus Vaccine | 1 | \$56.00 | \$56.00 |
| Surgical Gloves | 2 | \$4.50 | \$9.00 |

TOTAL: **\$134.98**