

VETERINARY CLINIC INVOICE

Invoice Number: 404278

Date: 2025-11-25 10:13:34

Owner Name: Emma Davis

Payment Method: Cash

Item/Service	Quantity	Unit Price	Total
Consultation Fee	1	\$74.73	\$74.73
Rabies Vaccine	1	\$50.00	\$50.00
Syringe 5ml	2	\$1.50	\$3.00

TOTAL: \$127.73