

# VETERINARY CLINIC INVOICE

Invoice Number: 604953

Date: 2025-11-27 10:13:42

Owner Name: John Smith

Payment Method: Card

Item/Service	Quantity	Unit Price	Total
Consultation Fee	1	\$36.51	\$36.51
Rabies Vaccine	1	\$50.00	\$50.00
Bandages	1	\$6.00	\$6.00

**TOTAL:** \$92.51