

VETERINARY CLINIC INVOICE

Invoice Number: 101188

Date: 2025-11-22 10:12:36

Owner Name: David Lee

Payment Method: Insurance

Item/Service	Quantity	Unit Price	Total
Consultation Fee	1	\$46.03	\$46.03
Anti-Inflammatory	1	\$32.40	\$32.40

TOTAL: \$78.43