

# VETERINARY CLINIC INVOICE

Invoice Number: 1201632  
Date: 2025-12-03 10:14:00  
Owner Name: Mike Brown  
Payment Method: Card

Item/Service	Quantity	Unit Price	Total
Consultation Fee	1	\$73.28	\$73.28
Surgical Gloves	1	\$4.50	\$4.50

TOTAL: **\$77.78**