

# VETERINARY CLINIC INVOICE

**Invoice Number:** 1102591

**Date:** 2025-12-02 10:13:58

**Owner Name:** Mike Brown

**Payment Method:** Card

Item/Service	Quantity	Unit Price	Total
Consultation Fee	1	\$65.07	\$65.07
Parvovirus Vaccine	1	\$56.00	\$56.00
Antibiotic Pills	2	\$27.00	\$54.00

**TOTAL:** \$175.07