

VETERINARY CLINIC INVOICE

Invoice Number: 304676
Date: 2025-11-24 10:12:52
Owner Name: Mary Johnson
Payment Method: Cash

Item/Service	Quantity	Unit Price	Total
Consultation Fee	1	\$66.82	\$66.82
Pain Relief	2	\$36.00	\$72.00

TOTAL: **\$138.82**