

## TOOTHY HURTY INVOICE

**Bill From** 

Name: Toothy Hurty Dental Company Name: Big Dental Street Address: Main Street, 1 City, ST ZIP Code: Letterkeny

Phone: 083 8249632

**Bill To** 

Patient Name: Edgar Malevic

Patient Address: 48 Solomon's Court,

Letterkenny

Patient Phone: 0838249478

Invoice No.997001

Invoice Date: 21/03/2025

Description	Appointment Time/Date	Price (\$)	Total (\$)
Tooth Filling	26/03/2025 13:00		\$75.00
		Subtotal	\$75.00
		Sales Tax	\$11.25
		Other	
		Total	\$86.25

