



INVOICE

Invoice #: INV-6CAA65
Date of Issue: 06/09/2025
Due Date: 07/09/2025

BILLED TO:

Christian Kim Calizo
Niggafied
0993387391

DESCRIPTION	QTY	RATE	AMOUNT
Total Cholesterol	1	₦250.00	₦250.00
Subtotal:			₦250.00
TOTAL:			₦250.00

TERMS & CONDITIONS:

Payment is due within 30 days. Please make payments to Example Clinic.

THANK YOU FOR YOUR BUSINESS!

Payment Reference (if paid): PAY-95F5DA87