

**INVOICE**

14425 Bergen Blvd, Ste B  
Noblesville, IN 46060  
PH (317) 436-7801  
FX (317) 245-2518

PO Number	Invoice Number
16695	43219

Invoice Date	Surgery Date	Due Date
8/21/25	8/13/25	9/11/25

Bill To	➡ Customer No.: <b>C1784</b>
<b>Larkin Community Hospital</b> 7031 SW 62nd Ave South Miami, FL 33143	

**Terms: Net 30 days**

Item Code	Description	Quantity	Price Each	Amount
50M-1416-06-SP	Cervical 14Dx16Wx6H	2.00	1,350.00	2,700.00
31-2-32	AC Plate, 2 Level, 32 mm	1.00	1,350.00	1,350.00
31-6-4016	Variable Screw, Self-Drill, Ø4.0x16 mm	6.00	200.00	1,200.00
		SUBTOTAL		5,250.00
		FREIGHT		0.00
		DEP/DISC/PMT		5,250.00
		<b>TOTAL</b>		<b>0.00</b>