

INVOICE# NO REFERENCE INFORMATION

Alex Ziskind

Bill To:

Date: 01/05/2024

FOUNTAIN PEN HOSPITAL

Balance Due: \$36.84

Total:

\$36.84

Item	Quantity	Rate	Amount
Fuel Surcharge	1	\$2.09	\$2.09
Direct Signature Required (Express Shipments)	1	\$3.17	\$3.17
Weight	1	\$13.00	\$13.00
Base Transportation	1	\$16.08	\$16.08
Reporting fee	1	\$2.50	\$2.50