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INVOICE #01 Date: 10/26/2020

LABORATORIO CLINICO GENESIS DBA AILEEN RAMOS RIVERA CALLE NESTOR TORRES 31 POBLADO ROSARIO SAN GERMAN PR 00683 Policy Number: CLP-20043

**TOTAL AMOUNT:** \$424.00

Invoice	Effective	Description	AMOUNT
01	04/23/2018	Primary Policy:CLP-20043 Effective From 04/23/2018 to 04/23/2019	\$424.00
		TOTAL	\$424.00

Thank you for your business.

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