

Invoice Date

3/8/2022

Physician Name

david

Facility Name

hospital 101

S.No	Title	Description	Cost
1	Hours Worked	The physician worked for 2.00 hours	40.00
2	Rental Car	Test	20

Hours Worked receipt	Hours Worked receipt	Hours Worked receipt	Rental Car receipt	
Dental Consequent	Double Conversion			
Rental Car receipt	Rental Car receipt			