



55 White Rose Drive  
PO Box 29006  
St John's, NL A1A 5B5  
Phone: (709) 753-3372 Fax: (709) 753-3376  
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# Receipt

2018-01-03

**Issued to:** DFO  
PO Box 5667  
St. John's, NL A1B 0J6

**On behalf of:** Lewis, Keith  
NL

Payment Date	Description	Amount Paid
2018-01-03	Visa	\$250.00

## Payment Detail:

Date of Service	Invoice #	Client Name	Description	Provider Name & Registration Info	Payment
2017-11-15	109609	Lewis, Keith	Workstation Review	Hopkins, Brad, BSC PT, MCPA, #000687	\$250.00

THERAPEUTIC SERVICES  
55 WHITE ROSE DRIVE  
ST. JOHN'S NL, A1A 5G9  
709-753-3372

## SALE

MID: 5624400 HST: 1234567890  
TID: 201 REF#: 00000022  
Batch #: 144  
01/03/18 15:33:34  
V-CODE: M  
APPR CODE: 131733  
MASTERCARD Manual CNP  
\*\*\*\*\*5804 \*\*/\*\*

**AMOUNT \$250.00**

APPROVED

I AGREE TO PAY ABOVE TOTAL AMOUNT  
IN ACCORDANCE WITH CARD ISSUER'S  
AGREEMENT  
(MERCHANT AGREEMENT IF CREDIT VOUCHER)  
RETAIN THIS COPY FOR STATEMENT  
VERIFICATION

THANK YOU / MERCI!

CUSTOMER COPY