



1315 Derry Road East, Unit4,2F  
Mississauga, ON  
L5T 1B6  
905-817-8170

INVOICE #:002554

DATE:December 14, 2024

BHARAT SHARMA  
552 Fernforest Drive  
Brampton , Ontario L6R 0V8

**\$495.00**

Item / Item Description	QTY	Unit Cost	Total
Custom Made Orthotics	1	\$495.00	\$495.00
		TOTAL	\$495.00
AMOUNT PAID			\$495.00
BALANCE			\$0.00

DATE DISPENSED: \_\_\_\_\_



220 Duncan Mill Road, Unit 317, Toronto M3B 3J5, Telephone: 416-445-3555, Fax: 416-445-3554

## INVOICE

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Invoice No. 029261

Invoice Date: June 06, 2025

### Customer Info

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Name: CARSON LEE

Address: 241 Rivermill Crescent  
MAPLE Ontario L6A 0G8

Referring MD: Dr. Minoo,A.

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ITEM DESCRIPTION	QTY	PRICE	AMOUNT	Service Date
Custom Made Orthotics	2	\$500.00	\$1,000.00	

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**Total: \$1,000.00**

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### Payment Info

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Dispense Date: June 06, 2025

Amount: \$1,000.00

Amount Due: \$0.00

Method: MasterCard

Payment Date: June 06, 2025

**Received by and date:**

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BodyBliss One Care  
1585 Markham Rd, Suite 401,  
Scarborough, ON M1B2W1  
T: 416.479.4467  
F: 416.850.5370

## INVOICE

Invoice No. 008947

Date: June 12, 2025

Customer Name: DAVID MAK

Referring MD: Dr. Leung,J.

Address: 106 SEEDLING CRESCENT Stouffville Ontario L4A 4V5

ITEM DESCRIPTION	QTY	PRICE	AMOUNT	SERVICE DATE
Knee Brace	2	\$360.00	\$720.00	06/12/2025

**Total:\$720.00**

Amount:\$720.00

Amount Due: \$0.00

Dispense Date: June 12, 2025

Payment Method: VISA

Payment Date: June 12, 2025

Signed: \_\_\_\_\_

# bodybliss

A3-220 Duncan Mill Road Toronto, Ontario M3B3J5

Tel # 416-224-9900 Fax 416-849-0363

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## INVOICE

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Invoice No. 037345

Date: June 10, 2025

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Customer Name: IRENE FONG

Referring MD: Dr. Der,A.

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Address: 10 EPSOM AVENUE Toronto Ontario M4C 2A6

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ITEM DESCRIPTION	QTY	PRICE	AMOUNT	SERVICE DATE
Compression Hose (20-30 mmHg) Model Juzo 2001AT Pantyhose	4	\$200.00	\$800.00	06/10/2025

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**Total: \$800.00**

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Amount: \$800.00

Amount Due: \$0.00

Dispense Date: June 10, 2025

Payment Method: MasterCard

Payment Date: June 10, 2025

# MY Cloud

203-3459 Sheppard Ave .East  
Toronto,Ontario, M1T 3K5  
Tel# 647-349-7420 Fax # - 647-349-7425

PATIENT NAME: EVA CALLOS  
ADDRESS:806 - 1154 Wilson Avenue Toronto Ontario  
M3M 1J6

INVOICE #: 003369  
DATE: February 20, 2025

NAME / DESCRIPTION	QTY	Service Date	UNIT PRICE	AMOUNT
Compression Hose (20-30 mmHg) Model Juzo 2001AT Pantyhose	4		\$250.00	\$1,000.00

## INVOICE NOTES

Date Product Received

Total \$1,000.00  
Amount Paid \$1,000.00  
Balance Due \$0.00