**Invoice ID**: 00032

# **Invoiced From**

#### ShippingXPS

\_ -

Address:- -Phone: - -Email : - -

# Invoiced To:

## Ralph Patel

Address:999 North Old Drive, Qui doloremque deser

Phone: 18567996437

Email: customer@shippingxps.com

## Charges

Charges For Insurance Request with Shipping	100
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Sub Total: \$100 Discount: \$0 Grand Total: \$100

#### **Payments:**

Payment Method	Date	Status	Payment Amount
Card	09-02-2022	Payment Complete	100