

Campus Vitality™

Invoice

Customer Details

Name: Srinivasa Rithik
Email: srinivasarithik23@gmail.com
Phone: 6176099554

Booking Details

Booking ID: 6754b0c6ca0015ca33d15c85
Plan Name: UHC Student Health
Plan Service Provider : UnitedHealthcare
Price: \$99
Payment Status: Succeeded
Invoice Date: 12/7/2024, 3:32:06 PM
Start Date: 2024-12-19
Duration: 1 month(s)
Total Paid: \$99

Your insurance copy will be sent by the concerned company in 2-3 working days.