

3309 West 96th Street Indianapolis, Indiana, 46268 Ph: 317-721-6110 Email: info@aadci.com

BILL TO Songstad, Nicole INVOICE 437194 CUSTOMER ID: ORDER #: ANIMAL .

69-19-2023 4815 N. Maple Grove Rd. 09-19-2023 Bloomington, IN, 47404 206418 Ralphie

DESCRIPTION	CLINICAL #:		
	STAFF MEMBER	QTY	TOTAL
Antigens- Vial 2	Lori Thompson, DVM, DACVD	1	\$405.00
Script Written	Lori Thompson, DVM, DACVD	1	\$0.00

Subtotal \$405.00 Total \$405,00 Paid \$405.00 Due \$0.00