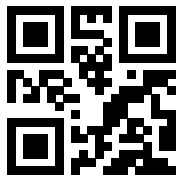


INVOICE

Your application invoice details



To: Saad Nafie
ID: 20230430061628
Issued Date: 2023-04-30 06:25:49
status: Paid

#	Main Credentials	Quantity	Total
1	Educational Credential	1	\$65
2	Transcript of Records Credential	1	
3	Health License Credential	1	

Main Cost: \$65

Additional Cost: \$0

Total Amount: \$65
