PACKAGE INVOICE #1050635570

Patient Information

Name: Tester check Address: fdfd, Alabama.

Facility Informatio

Name: Facility_four(QA)
Address: NNN
Queens Village, New York,United States11428

Invoice Date: # 25th Feb 2022

Package Name: free

s/N	Service	Date Taken	Total
1	hammer	11/8/22	\$0
2	free service	Not taken yet.	\$0
3	Dermo	Not taken yet.	\$20

Sub - Total amount: \$20

Membership Discount: \$0

Discounted amount: \$ 2

Total Paid: \$ 18