Customer: 5181319421 **Name**: Andre Crawford MD

Address:

49749 Lisa Trail

South April, Minnesota 40828 **Home Phone:** 566.981.5170x054

Invoice #: INV-2H8TB-31 Transaction ID: P27202714763

Generated On: 2023-05-11T04:18:53Z

Invoice Status: Paid

Payment Date: 2023-04-04

Item 1	\$63.20
Item 2	\$5,179.04
Item 3	\$19,442.33
Total	24684.57