

**Customer:** 2683426778

**Name:** Michelle Ortiz DDS

**Address:**

8522 Mata Meadows

Anthonyfurt, Minnesota 41730

**Home Phone:** 001-462-282-3862x23318

**Invoice #: INV-8R7HK-29**  
**Transaction ID: R16713181136**

**Generated On:** 2023-05-05T17:11:34Z

**Invoice Status:** Paid

**Payment Date:** 2023-05-01

Item 1	\$3,050.89
Item 2	\$2.52
Item 3	\$37,353.87
Total	40407.28