Customer: 0080080330 Name: Dr. Tina Reed DDS

Address:

5804 Gibson Village Suite 796 Port Timothyville, Missouri 97412 **Home Phone:** 480.840.8336x1567

Invoice #: INV-5N9BU-39
Transaction ID: Q28729460871

Generated On: 2023-03-24T19:15:18Z

Invoice Status: Paid

Payment Date: 2023-02-18

Item 1	\$18.66
Item 2	\$2.65
Item 3	\$2.58
Total	23.89