

**Customer:** 6698636941  
**Name:** Mark Adams DDS  
**Address:**  
3824 Price Spurs Suite 970  
Alexandertown, Missouri 70860  
**Home Phone:** 8194900556

**Invoice #: INV-5D6SN-53**  
**Transaction ID: V42584272995**

**Generated On:** 2023-03-29T21:05:23Z  
**Invoice Status:** Paid  
**Payment Date:** 2023-03-05

Item 1	\$1,668.78
Item 2	\$6,686.05
Item 3	\$9,835.83
Total	18190.66