Customer: 0540293917 **Name**: Dale Mitchell DDS

Address:

6316 Adams Inlet Suite 277 New Mary, Arkansas 27424

Home Phone: 077-317-1571x316

Invoice #: INV-3Q9UV-57
Transaction ID: G81426000810

Generated On: 2023-02-17T08:22:43Z

Invoice Status: Paid

Payment Date: 2023-02-11

| Item 1 | \$95,306.28 |
|--------|-------------|
| Item 2 | \$95.51 |
| Item 3 | \$4.49 |
| Total | 95406.28 |