

**Customer:** 9958124510

**Name:** Kaitlin Boyd MD

**Address:**

6979 Gates Highway Apt. 450

Bobbyport, Alaska 75020

**Home Phone:** 001-949-934-9532x7914

**Invoice #: INV-8B8RB-49**  
**Transaction ID: D29991548161**

**Generated On:** 2023-02-15T03:15:07Z

**Invoice Status:** Paid

**Payment Date:** 2023-03-11

|        |         |
|--------|---------|
| Item 1 | \$50.26 |
| Item 2 | \$8.67  |
| Item 3 | \$0.96  |
| Total  | 59.89   |