Customer: 6433716366 Name: Dr. Alicia Russell MD

Address: 407 Webb Hill

Port Christineville, Connecticut 44388 **Home Phone:** 001-358-844-8057

Invoice #: INV-1M1KC-44
Transaction ID: H38934987580

**Generated On:** 2023-05-15T05:16:36Z

**Invoice Status:** Paid

**Payment Date: 2023-05-28** 

| Item 1 | \$19.38 |
|--------|---------|
| Item 2 | \$6.05  |
| Item 3 | \$29.37 |
| Total  | 54.8    |