

**Customer:** 6650926523  
**Name:** Jacob Rodriguez MD  
**Address:**  
66059 Amy Knoll  
Kathleenberg, Alaska 07408  
**Home Phone:** 757-387-0009x287

**Invoice #: INV-0H8PA-23**  
**Transaction ID: K45313113321**

**Generated On:** 2023-04-18T15:00:16Z  
**Invoice Status:** Paid  
**Payment Date:** 2023-03-17

Item 1	\$424.28
Item 2	\$1.86
Item 3	\$3.72
Total	429.86