Customer: 6134265518 Name: Samantha Cain DDS

Address:

7418 Lee Parkway

Norrisport, Florida 91134

Home Phone: 989-053-6940x45929

Invoice #: INV-8T8QP-57
Transaction ID: C77953822120

**Generated On:** 2023-04-10T20:57:51Z

Invoice Status: Paid

**Payment Date: 2023-03-21** 

| Item 1 | \$453.14    |
|--------|-------------|
| Item 2 | \$3,686.29  |
| Item 3 | \$17,942.46 |
| Total  | 22081.89    |