

Customer: 3416860902
Name: Hector Smith DDS
Address:
44200 Thomas Trace
Port Jillside, Louisiana 49833
Home Phone: (105)675-7875x919

Invoice #: INV-7P4IA-48
Transaction ID: S93122889796

Generated On: 2023-03-12T13:54:43Z
Invoice Status: Paid
Payment Date: 2023-03-09

Item 1	\$778.85
Item 2	\$50,334.36
Item 3	\$8.97
Total	51122.18