

**Customer:** 0216599127  
**Name:** Dr. Renee Rogers DVM  
**Address:**  
09864 Gonzalez Lane  
Garciaport, Indiana 19804  
**Home Phone:** 2225522751

**Invoice #: INV-8N2LN-73**  
**Transaction ID: Z60304348924**

**Generated On:** 2023-02-10T20:45:39Z  
**Invoice Status:** Paid  
**Payment Date:** 2023-02-16

Item 1	\$8.68
Item 2	\$7,917.66
Item 3	\$7,156.47
Total	15082.81