

**Customer:** 1038743707  
**Name:** Tiffany Faulkner MD  
**Address:**  
56708 Foster Ports  
South Brianberg, Louisiana 71482  
**Home Phone:** 809.364.0481

**Invoice #: INV-8N9KZ-47**  
**Transaction ID: E99022251886**

**Generated On:** 2023-04-17T19:27:52Z  
**Invoice Status:** Paid  
**Payment Date:** 2023-03-12

Item 1	\$2.54
Item 2	\$278.30
Item 3	\$1,827.82
Total	2108.66