**Customer**: 5769738312 **Name**: Marcus Gallagher

Address:

2484 Lisa Ferry Apt. 789

West Gail, Massachusetts 35654 **Home Phone:** (779)598-6458x60059

Invoice #: INV-4B1BA-42
Transaction ID: N52769438436

**Generated On:** 2023-02-01T17:02:32Z

Invoice Status: Paid

**Payment Date: 2023-02-19** 

Item 1	\$45,571.89
Item 2	\$663.92
Item 3	\$9,168.39
Total	55404.2