

**Customer:** 523183462  
**Name:** Christopher Smith DDS  
**Address:**  
14142 Jacob Crescent  
New John, Massachusetts 78853  
**Home Phone:** (155)932-3401x659

## **Invoice: INV-7J8AG-08**

**Generated On:** 2022-06-29T17:18:05Z  
**Status:** Paid  
**Payment Date:** 5/16/2022

Item 1	\$0.00
Item 2	\$116.89
Item 3	\$71,095.00
Total	71211.89