**Customer:** 5556408080 **Name:** James Williams MD

**Address:** 

92400 Sarah Summit Suite 723 Vegaborough, Minnesota 12559 **Home Phone:** (080)341-0998

**Invoice: INV-1R5CI-31** 

**Generated On:** 2022-02-08T07:04:15Z

Status: Paid

**Payment Date:** 1/5/2022

Item 1	\$867.67
Item 2	\$599.05
Item 3	\$7,529.40
Total	8996.12