

**Customer:** 6677676158

**Name:** Kyle Mahoney MD

**Address:**

308 Mccarthy Isle

New Rhonda, Minnesota 17021

**Home Phone:** 001-431-183-8189x602

## **Invoice: INV-4A4PJ-04**

**Generated On:** 2022-03-10T00:36:51Z

**Status:** Paid

**Payment Date:** 3/27/2022

Item 1	\$4,734.50
Item 2	\$1,163.54
Item 3	\$2.67
Total	5900.71