

This website uses cookies for improvement of quality and user experience. By continuing to use the site, you confirm your awareness and acceptance of our use of cookies. For more information or to opt out of the use of cookies, see our Cookies Notice.

Payment Confirmation

Thank you for your payment.

Please **print this page** for your receipt. You will receive an acknowledgment by e-mail shortly. Your payment date will be within the next five business days.

Payments will be processed separately for each invoice listed below.

Invoices

Lab Code	Tracking Number	Invoice Number	Amount
DAL	367756044	7507276194	\$2.15
Total of Submitted Payments			\$2.15

Payment Method

Card Holder Name Adriana L Guerra

Credit Card Type Visa

Card Number *********0252

Phone Number 949-763-8167

Email Address thebkrasri@gmail.com

Submitted Date 01/22/2020

Quest, Quest Diagnostics, any associated logos, and all associated Quest Diagnostics registered or unregistered trademarks are the property of Quest Diagnostics. All third party marks - ® and ™ - are the property of their respective owners. © 2020 Quest Diagnostics Incorporated. All rights reserved. For more information go to www.QuestDiagnostics.com

Quest Diagnostics Incorporated and its subsidiaries (Quest) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national, origin, age, disability, or sex.