

# INVOICE

## Your Veterinary Hospital, LLC

1111 Compassion Court, Everytown, USA

*Compassionate care for all species!*



Client: Chris P. Bacon

Date: 09-26-2019

Invoice: 0000

QTY	DESCRIPTION	PRICE
1	DVM service/office visit	_____
1	Dexmedetomidine Butorphanol Sed	_____
1	Dexmedetomidine HCL 0.5mg/ml	_____
1	Butorphanol 10m/ml per ml	_____
1	REBOUND PRP therapy	_____
1	Blood collection	_____
1	Platelet Rich Plasma separation	_____
1	Joint injection	_____
1	Antisedan reversal	_____
1	Antisedan 10ml per ml	_____
1	Technician services (30 min.)	_____

**TOTAL:** \_\_\_\_\_

**WEIGHT:** \_\_\_\_\_ lbs

*Thank you for letting us care for your fur-family!*

**What does this combo of services cost your clients?**