Invoice Number	240603024906	Fiscal No: 3911853
Invoice Date	3/6/2024	
Patient	Caren Akiki Najm Bouar 03/435586	

Code	**TestName**		**Price $**
85022	CBC and Platelet count		3.15
85651	ESR		1.05
82947	Glucose		1.05
84520	Urea		0.84
82565	Creatinine		1.40
84550	Uric acid		1.40
80061	Lipid panel: Cholesterol, HDL, Triglycerides		5.95
83540	Iron		2.45
82310	Calcium		1.40
83735	Magnesium		1.68
82150	Amylase		2.80
84450	SGOT (AST)		2.45
84460	SGPT (ALT)		2.45
83615	LDH		2.80
82550	CPK		2.80
86140	CR protein (h.s.)		7.35
83036	HbA1c		9.80
82728	Ferritin		11.20
84443	TSH u.s		10.15
82306	Vitamin D2/D3 (25-OH vitamin D)		16.45
82607	Cyanocobalamine (Vitamin B12)		10.50
82977	GGT		2.80
84155 2	Albumin		1.40
		Total Invoice Amount	103.32
		Patient Share	103.32
		Net Amount	103.32

The Sum of US Dollar one hundred and three and 32/100 only.