

Kristine Brackman
4490 halle circle nw
massillon, OH 44647
(234) 804-9576



Payment History - Kristine Brackman

Receipt Number 20380
Payment Entry Date 8/26/2020 6:44 PM
Amount Paid \$94.00
Payment Mastercard \$94.00
Cashier Madison H.

Invoice Number	19880
Date	8/26/2020

Patient	Provider	Description	Date	Quantity	Subtotal	Tax	Total
Brandit	STEPHANIE PETEYA , D.V.M.	Office Call - Exam	8/26/2020	1	\$42.00	\$0.00	\$42.00
Carl	STEPHANIE PETEYA , D.V.M.	Office Call - Exam Additional Animal	8/26/2020	1	\$32.00	\$0.00	\$32.00
Carl	STEPHANIE PETEYA , D.V.M.	Tonopen Glaucoma Test	8/26/2020	1	\$20.00	\$0.00	\$20.00

Subtotal	\$94.00
Tax	\$0.00
Invoice Total	\$94.00
Paid in Transaction	\$94.00
Paid to Date	\$94.00
Amount Remaining	\$0.00

FULTON ANIMAL HOSPITAL
812 CHERRY ST E
CANAL FULTON, OH 44614

08/26/2020 18:44:27

CREDIT CARD

VISA SALE

Card # XXXXXXXXXXXX1030
Chip Card: SCOTIABANK VISA
AID: A0000000031010
SEQ #: 32
Batch #: 526
INVOICE 33
Approval Code: 440652
Entry Method: Chip Read
Mode: Issuer - PIN Verified

SALE AMOUNT \$94.00

Kristine Brackman
 4490 halle circle nw
 massillon, OH 44647
 (234) 804-9576



Payment History - Kristine Brackman

Receipt Number 20445
Payment Entry Date 8/27/2020 4:45 PM
Amount Paid \$208.82
Payment Visa \$208.82
Cashier Jessica F.

Invoice Number	19910
Date	8/27/2020

Patient	Provider	Description	Date	Quantity	Subtotal	Tax	Total
Bandit	RX DUANE C. STEWART , D.V.M.	Revolution / Selarid (Brown)10-20 LBS	8/27/2020	6	\$98.04	\$6.37	\$104.41
Carl	RX DUANE C. STEWART , D.V.M.	Revolution / Selarid (Brown)10-20 LBS	8/27/2020	6	\$98.04	\$6.37	\$104.41
						Subtotal	\$196.08
						Tax	\$12.74
						Invoice Total	\$208.82
						Paid in Transaction	\$208.82
						Paid to Date	\$208.82
						Amount Remaining	\$0.00

Bandit Brackman's Reminders

Description
 RABIES 1 YEAR
 Annual Bordetella Vaccine
 Annual Dhppv (No Lepto)
 Annual Lepto Vaccine
 Heartworm Test

FULTON ANIMAL HOSPITAL
 812 CHERRY ST E
 CANTON, OH 44614
 08/27/2020 16:44:35
 CREDIT CARD
 VISA SALE
 Card # XXXXXXXXXXXX1030
 Chip Card: SCOTIABANK VISA
 AID: A000000031010
 SEQ #: 23
 Batch #: 527
 INVOICE 23
 Approval Code: 438685
 Entry Method: Chip Read
 Mode: Issuer - PIN Verified

Date Due
 12/30/2020
 12/30/2020
 12/30/2020
 1/24/2021
 6/23/2021

Carl Brackman's Reminders

Description
 Annual Dhppv (No Lepto)
 Annual Bordetella Vaccine
 Annual Lepto Vaccine
 Heartworm Test
 RABIES 3 YEAR

SALE AMOUNT \$208.82

Date Due
 12/24/2020
 12/29/2020
 1/18/2021
 6/23/2021
 12/24/2022

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