

## **Invoice**

2/9/2018

Boise, ID 83702 208.258.8139

Invoice #: 1978

Terms: Net 30

Hamilton Memorial Hospital Kent Mitchell PO Box 429 McLeansboro, IL 62859

| Description   | Rate     | Quantity | Amount   |
|---|----------|----------|----------|
| Billing for January 2018. Please see attached spreadsheet for a detailed breakdown of your savings. | 2,549.35 |          | 2,549.35 |
|   |          |          |          |
|   |          |          |          |
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|   |          |          |          |
|   |          |          |          |
|   |          |          |          |
|   |          |          |          |
|   |          |          |          |

**Total Invoice** 

\$2,549.35