

**Payment Processed:**

**!!! Payment Successful !!!**

**Confirmation Number:**

ODN2MVXPTX

**Invoice Amount Paid:**

\$85.00

**Convenience Fee :**

\$1.56

**Payment Submission Date:**

09/14/2021

<b>Invoice No.</b>	<b>Reference No.</b>	<b>Name</b>	<b>Amount</b>
0000184947	AR-21-015692	MINT DENTISTRY	85.00

**Total Amount Paid: \$86.56**

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