

RO

## RO Wellness Suite

Diagnostic Imaging Services

# INVOICE

#45

### BILLED TO

#### Test Account

voguehosting.com@gmail.com

Patient ID

**159**

Booking ID

**45**

### INVOICE DETAILS

Invoice Date: **29 Oct 2024**

Appointment Date: **10/28/2025**

Appointment Time: **13:30**

Payment Status: **UNPAID**

Payment Method: **ONLINE**

### SERVICES PROVIDED

Type	Service Description	Price	Amount
stand-alone	Brain Scan	\$1,400.00	\$1,400.00

Package: \$0.00

Additional Packages: \$1,400.00

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Subtotal: \$1,400.00

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Tax (0%): \$0.00

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Discount: -\$0.00

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**Total Amount: \$1,400.00**

2121 Williams Trace Blvd, Suite 100

Sugar Land, Texas, 77478

Phone: +1 281-747-7277

Email: [info@riveroaksmri.com](mailto:info@riveroaksmri.com)

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Thank you for choosing RO Wellness Suite for your diagnostic imaging needs.

This invoice was generated by our system; no signature is required.