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Invoice

To:

Michael Laham
PO Box 25219
Karmiel, N/A 2191204
IL

[Print](#)**Invoice Number:** 41759038**Credit Card:** VISA - 3214**Payment Date:** 02/28/19

Date	Description	Bill Period	Amount
02/28/19	Subscription Fee - Website Gold Plus Package - Monthly	03/05/19 - 04/05/19	\$21.99

Total Amount: \$21.99

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