

Department of Health & Human Services



Department of Health & Human Services  
Office of Radiological Health  
301 Centennial Mall South  
PO Box 95026  
Lincoln, NE 68509  
Attn:( vickey.cox@nebraska.gov)

**INVOICE FOR PUBLIC INFORMATION**  
**BU: 25460016.4722**

**To: John Doe Chiropractic**  
**P.O. Box 555**  
**Lincoln, NE 68508-6214**

**Invoice # 5555**

johndoe@johndoe.com; April 26, 2016

DATE	Description	TOTAL
5/4/16	X-Ray Registrant List: Partial List, Alphabetic, E-File	\$20.00
<b>TOTAL AMOUNT DUE</b>		<b>\$20.00</b>

Please make check(s) payable to:  
**Nebraska Department of Health and Human Services**  
**or DHHS**

Mail to the listed above

Be sure to include this **Invoice** with the check