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**STRIB PEST CONTROL COMPANY LLC**

P.O. BOX 91237 Milwaukee, WI 53209

**INVOICE**

Invoice Number: INV-20260715-0464

Date: 2026-07-15

**BILL TO:**

Mariahs Family Care Home

4504 N 45th Street

Milwaukee, WI 53218

| Location           | Description      | Date       | Charge (\$) |
|--------------------|------------------|------------|-------------|
| 4485 N 45th Street | Bedbug treatment | 2026-07-10 | 125.00      |

**Subtotal:** **\$125.00**

**Sales Tax:** **\$0.00**

**Total Due:** **\$125.00**