

PRWeb Receipt

PRWeb Invoice #	1026-3575464-23342-PR-17902230									
PRWeb Account Information	Shriners Hospitals for Children Attention: Lisa Melchiorre 2900 N Rocky Point Dr. Tampa, FL 33607 8132810300									
Payment Date	Wednesday, April 28, 2021									
Payment Time	5:23:02 PM									
Payment Amount	\$608.00									
Payment Method	Visa Credit Card									
Cardholder Name	Lisa Melchiorre									
Card Number	XXXXXXXXXXXX4434									
Order Information	<table> <tr> <td>Premium Package</td> <td>\$389.00</td> </tr> <tr> <td>Enhanced Placement (3)</td> <td>\$120.00</td> </tr> <tr> <td>Cision Social Post</td> <td>\$99.00</td> </tr> <tr> <td>Order Total</td> <td>\$608.00</td> </tr> </table>	Premium Package	\$389.00	Enhanced Placement (3)	\$120.00	Cision Social Post	\$99.00	Order Total	\$608.00	
Premium Package	\$389.00									
Enhanced Placement (3)	\$120.00									
Cision Social Post	\$99.00									
Order Total	\$608.00									

[Return to My Releases](#)
[Upload Your Release](#)