



(http://medicalmarijuana.pa.gov)

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7/23/2022	

Helpdesk Contact: 888-733-5595

Make Payment

Receipt details

Your order was processed successfully. Here is your receipt.

<u>Print Receipt</u> Save

Receipt

====== TRANSACTION RECORD =======

DEPT OF HEALTH ID CARDS 625 FORSTER ST #628 HARRISBURG, PA 17120

United States

WWW.MEDICALMARIJUANA.PA.GOV

TYPE: Purchase

ACCT: Mastercard \$ 50.00 USD

CARDHOLDER NAME : Michael Cheikin
CARD NUMBER : #########4669
DATE/TIME : 23 Jul 22 23:26:48

REFERENCE # : 002 0099420 M

AUTHOR. # : 03378S

TRANS. REF. :

Approved - Thank You 100

Please retain this copy for your records.

Cardholder will pay above amount to card issuer pursuant to cardholder agreement.

This order is now complete. Transaction approved!

You will receive your medical marijuana ID card in the mail at the address you provided.