

ULTRADENT PRODUCTS, INC. PO BOX 952648 ST LOUIS, MO 63195-2648

Toll Free Phone Number: 800.552.5512

Phone Number: 801.572.4200

BILL TO: Attn: Accounts Payable ALLEN AND ALLEN FAMILY DENTISTRY 140 MAIN CROSS ST Hawesville KY 42348

## INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	31-JUL-19
TERMS	30 NET
INVOICE DATE	01-JUL-19
INVOICE NUMBER	13557022
CUSTOMER ID	403379
PURCHASE ORDER	
SALES REP	Maritza Sims
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO: ALLEN AND ALLEN FAMILY DENTISTRY 140 MAIN CROSS ST Hawesville KY 42348

10219434 ID# 80439283-SMANDREA (4)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
3	5385_US	Opalescence 20% PF Mint Doctor Kit	Y	40.37	121.11
1	FRT	Freight	Y	16.95	16.95
1	03	Booklet Domestic Catalog	N	0	0.00

Saved Amount: \$6.36

Online ordering is now available 24 hours a day, 7 days a week. Please visit www.ultradent.com. When mailing your payment, please use the correct REMIT TO address to ensure the fastest posting to your account. Receive and pay bills online. Enroll at http://ultradent.billtrust.com. Enrollment tokens may be found on any statement or an invoice prior to 4/24/14.

SUBTOTAL	SALES TAX	CHARGES	INVOICE TOTAL	AMOUNT PAID	AMOUNT DUE
138.06	8.29	0.00	146.35	146.35	0.00

PLEASE RETURN THIS PORTION WITH PAYMENT



AMOUNT DUE	0.00	
CURRENCY	USD	
TERMS	30 NET	
INVOICE NUMBER	13557022	
CUSTOMER ID	403379	3
SALES REP	Maritza Sims	

A FINANCE CHARGE OF 1.5% PER MONTH (ANNUAL RATE OF 18%) ON THE UNPAID BALANCE WILL BE ADDED MONTHLY. MINIMUM CHARGE: 75 CENTS.

☐ CHECK IF THERE IS A CHANGE OF ADDRESS

BILL TO:

REMIT TO:

Attn: Accounts Payable ALLEN AND ALLÉN FAMILY DENTISTRY 140 MAIN CROSS ST Hawesville KY 42348

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