

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 AESTHETIC FAMILY DENTISTRY 1551 W PARKS HWY WASILLA AK 99654

INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	01-AUG-19
TERMS	30 NET
INVOICE DATE	02-JUL-19
INVOICE NUMBER	13559117
CUSTOMER ID	39015
PURCHASE ORDER	
SALES REP	Xavier Bradley
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO: AESTHETIC FAMILY DENTISTRY 1551 W PARKS HWY WASILLA AK 99654

10220674 ID# 80439475-SMANDREA (7)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
2	5397_US	Opalescence 15% PF Mint Refill Kit	N	150.99	301.98
1	5397_US	Opalescence 15% PF Mint Refill Kit	N	0	0.00
2	5398_US	Opalescence 15% PF Melon Refill Kit	N	150.99	301.98
1	5398_US	Opalescence 15% PF Melon Refill Kit	N	0	0.00
1	4638_US	Opalescence GO 15% Mint Patient Kit 6pk - US	N	191.62	191.62

Saved Amount: \$365.85

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
795.58	0.00	0.00	795.58	795.58	0.00

PLEASE RETURN THIS PORTION WITH PAYMENT



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TERMS	30 NET
INVOICE NUMBER	13559117
CUSTOMER ID	39015
SALES REP	Xavier Bradley

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:

Attn: Accounts Payable AESTHETIC FAMILY DENTISTRY 1551 W PARKS HWY WASILLA AK 99654 REMIT TO:

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