

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 DR ZAK PORTER 2137 NE 4TH ST Bend OR 97701

INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	24-SEP-19
TERMS	IMMEDIATE
INVOICE DATE	24-SEP-19
INVOICE NUMBER	13657963
CUSTOMER ID	419650
PURCHASE ORDER	
SALES REP	Jose Bernal
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO: DR ZAK PORTER 2137 NE 4TH ST Bend OR 97701

10312316 ID# 80439551-SMANDREA (15)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
5	136	Ultrapak Cord #00	N	14.99	74.95
2	5400_US	Opalescence 20% PF Mint Refill Kit	N	135.89	271.78
1	5402_US	Opalescence 20% PF Regular Refill Kit	N	135.89	135.89
1	5397_US	Opalescence 15% PF Mint Refill Kit	N	135.89	135.89
1	5399_US	Opalescence 15% PF Regular Refill Kit	N	135.89	135.89
3	137	Ultrapak Cord #000	N	14.99	44.97
2	136	Ultrapak Cord #00	N	0	0.00

Saved Amount: \$105.48

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
799.37	0.00	0.00	799.37	799.37	0.00

PLEASE RETURN THIS PORTION WITH PAYMENT



AMOUNT DUE	0.00	
CURRENCY	USD	
TERMS	IMMEDIATE	
INVOICE NUMBER	13657963	
CUSTOMER ID	419650	
SALES REP	Jose Bernal	

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 DR ZAK PORTER 2137 NE 4TH ST Bend OR 97701 REMIT TO:

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