



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  
585 DENTIST  
2751 DEWEY AVE  
ROCHESTER NY 14616

**INVOICE**

AMOUNT DUE	512.55
CURRENCY	USD
DUE DATE	26-OCT-19
TERMS	30 NET
INVOICE DATE	26-SEP-19
INVOICE NUMBER	13661773
CUSTOMER ID	394894
PURCHASE ORDER	
SALES REP	Web Store
TO VIEW ONLINE GO TO:	<a href="http://ultradent.billtrust.com">http://ultradent.billtrust.com</a>

**SHIP TO:**

585 DENTIST  
2751 DEWEY AVE  
ROCHESTER NY 14616

10315673 ID# 80439552-SMANDREA (3)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
1	5400_US	Opalescence 20% PF Mint Refill Kit	Y	143.44	143.44
1	5405_US	Opalescence 35% PF Regular Refill Kit	Y	143.44	143.44
1	5402_US	Opalescence 20% PF Regular Refill Kit	Y	143.44	143.44
1	OVRNHT	Overnight Freight	Y	44.25	44.25

**Saved Amount: \$22.65**

Online ordering is now available 24 hours a day, 7 days a week. Please visit [www.ultradent.com](http://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
474.57	37.98	0.00	512.55	0.00	512.55

-----  
PLEASE RETURN THIS PORTION WITH PAYMENT



AMOUNT DUE	512.55
CURRENCY	USD
TERMS	30 NET
INVOICE NUMBER	13661773
CUSTOMER ID	394894
SALES REP	Web Store

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  
585 DENTIST  
2751 DEWEY AVE  
ROCHESTER NY 14616

**REMIT TO:**

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

0039489413661773000000051255025