

**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 APEX DENTAL 7690 US 72 W **STE 101** Madison AL 35758

## INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	03-OCT-18
TERMS	Credit Card
INVOICE DATE	03-OCT-18
INVOICE NUMBER	13242950
CUSTOMER ID	905298
PURCHASE ORDER	
SALES REP	Web Store
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO: APEX DENTAL 7690 US 72 W **STE 101** Madison AL 35758

				9922850 ID# 72329800-SMANDREA (2		
QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE	
2	686	Astringedent IndiSpense Refill	Y	37.99	75.98	
1	FRT	FREIGHT	N	12.25	12.25	

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
88.23	6.84	0.00	95.07	95.07	0.00

PLEASE RETURN THIS PORTION WITH PAYMENT



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INVOICE NUMBER	13242950	
CUSTOMER ID	905298	
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

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REMIT TO:

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

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