



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  
GRACE DENTAL  
PO BOX 70648  
HOUSTON TX 77270

**INVOICE**

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	02-JAN-18
TERMS	Credit Card
INVOICE DATE	02-JAN-18
INVOICE NUMBER	12916457
CUSTOMER ID	41035
PURCHASE ORDER	
SALES REP	Web Store
TO VIEW ONLINE GO TO:	<a href="http://ultradent.billtrust.com">http://ultradent.billtrust.com</a>

**SHIP TO:**

GRACE DENTAL  
716 WEST 25TH ST  
HOUSTON TX 77008

9616992 ID# 68373429-SMANDREA (2)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
1	4648	Opalescence GO 15% Mint Mini Kit 12pk	Y	192.74	192.74
1	4638	Opalescence GO 15% Mint Patient Kit 6pk	Y	176.24	176.24

**Saved Amount: \$151.00**

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
368.98	30.44	0.00	399.42	399.42	0.00

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PLEASE RETURN THIS PORTION WITH PAYMENT



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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:**

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