



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
4TH AVE FAMILY DENTISTRY
390 UNIVERSITY BLVD
DENVER CO 80206-4125

INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	30-JUL-19
TERMS	IMMEDIATE
INVOICE DATE	30-JUL-19
INVOICE NUMBER	13592126
CUSTOMER ID	983695
PURCHASE ORDER	
SALES REP	Paige Bell
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO:

4TH AVE FAMILY DENTISTRY
390 UNIVERSITY BLVD
DENVER CO 80206-4125

10251772 ID# 80438946-SMANDREA (18)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
2	5400_US	Opalescence 20% PF Mint Refill Kit	Y	150.99	301.98
1	5397_US	Opalescence 15% PF Mint Refill Kit	N	0	0.00
8	5370_US	Opalescence 20% PF Mint Patient Kit	Y	38.49	307.92
2	5367_US	Opalescence 15% PF Mint Patient Kit	Y	38.49	76.98
5	5367_US	Opalescence 15% PF Mint Patient Kit	N	0	0.00

Saved Amount: \$343.44

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
686.88	57.09	0.00	743.97	743.97	0.00

PLEASE RETURN THIS PORTION WITH PAYMENT



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CURRENCY	USD
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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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DENVER CO 80206-4125

REMIT TO:

ULTRADENT PRODUCTS, INC.
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ST LOUIS, MO 63195-2648

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