

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 17TH STREET DENTAL OFFICE 319 E 17TH ST SANTA ANA CA 92706

INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	16-OCT-19
TERMS	30 NET
INVOICE DATE	16-SEP-19
INVOICE NUMBER	13649300
CUSTOMER ID	1191
PURCHASE ORDER	
SALES REP	Mark Lewis
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO:

17TH STREET DENTAL OFFICE 319 E 17TH ST

SANTA ANA CA 92706

10304042 ID# 80438952-SMANDREA (8)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
6	5371_US	Opalescence 20% PF Melon Patient Kit	Υ	34.64	207.84
1	FRT	Freight	Υ	16.95	16.95
2	S315	Sample Opal PF 15% & 20%	N	0	0.00

Saved Amount: \$23.10

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
224.79	20.80	0.00	245.59	245.59	0.00

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

BILL TO:

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SANTA ANA CA 92706

REMIT TO:

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