



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
BLAISDELL FAMILY DENTISTRY
8877 W HACKAMORE DR
BOISE ID 83709

INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	13-AUG-19
TERMS	IMMEDIATE
INVOICE DATE	13-AUG-19
INVOICE NUMBER	387888
CUSTOMER ID	28360
PURCHASE ORDER	2019 S4L Kits
SALES REP	Corie Sharp
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO:

BLAISDELL FAMILY DENTISTRY
8877 W HACKAMORE DR
BOISE ID 83709

10267135 ID# 80439136-SMANDREA (3)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
3	5382_US	Opalescence 15% PF Mint Doctor Kit	Y	21.25	63.75

Saved Amount: \$63.72

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
63.75	3.83	0.00	67.58	67.58	0.00

PLEASE RETURN THIS PORTION WITH PAYMENT



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TERMS	IMMEDIATE
INVOICE NUMBER	387888
CUSTOMER ID	28360
SALES REP	Corie Sharp

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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8877 W HACKAMORE DR
BOISE ID 83709

REMIT TO:

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

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