

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 DR ZAK PORTER 2137 NE 4TH ST Bend OR 97701

INVOICE

AMOUNT DUE	0.00
CURRENCY	USD
DUE DATE	24-SEP-19
TERMS	IMMEDIATE
INVOICE DATE	24-SEP-19
INVOICE NUMBER	13657963
CUSTOMER ID	419650
PURCHASE ORDER	
SALES REP	Jose Bernal
TO VIEW ONLINE GO TO:	http://ultradent.billtrust.com

SHIP TO: DR ZAK PORTER 2137 NE 4TH ST Bend OR 97701

10312316 ID# 80439472-SMANDREA (15)

QTY	ITEM NUMBER	DESCRIPTION/COMMENTS	TAX	UNIT PRICE	EXTENDED PRICE
5	136	Ultrapak Cord #00	N	14.99	74.95
2	5400_US	Opalescence 20% PF Mint Refill Kit	N	135.89	271.78
1	5402_US	Opalescence 20% PF Regular Refill Kit	N	135.89	135.89
1	5397_US	Opalescence 15% PF Mint Refill Kit	N	135.89	135.89
1	5399_US	Opalescence 15% PF Regular Refill Kit	N	135.89	135.89
3	137	Ultrapak Cord #000	N	14.99	44.97
2	136	Ultrapak Cord #00	N	0	0.00

Saved Amount: \$105.48

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
799.37	0.00	0.00	799.37	799.37	0.00

PLEASE RETURN THIS PORTION WITH PAYMENT



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CURRENCY	USD	
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INVOICE NUMBER	13657963	
CUSTOMER ID	419650	
SALES REP	Jose Bernal	

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:

REMIT TO:

Attn: Accounts Payable DR ZAK PORTER 2137 NE 4TH ST Bend OR 97701 ULTRADENT PRODUCTS, INC. PO BOX 952648 ST LOUIS, MO 63195-2648