

505 W 10200 South
South Jordan, UT 84095
Phone (800) 552-5512

Invoice

13829497

10459696 ID# 84115978-SMANDREA

☐ CHECK IF THERE IS A CHANGE OF ADDRESS
SEE REVERSE FOR CREDIT CARD PAYMENTS

Amount Due	\$0.00
Invoice Date	06-FEB-20
Invoice	13829497
Customer I.D.	77536
Customer Phone	413-442-8684
Purchase Order	

Attn: Accounts Payable
DR PHIL MAMOLITO
114 WENDELL AVE
PITTSFIELD MA 01201-6910

Attn: ACCOUNTS RECEIVABLE
ULTRADENT PRODUCTS, INC
PO BOX 952648
ST LOUIS, MO 63195-2648

00077536138294970000000000000029

505 WEST 10200 SOUTH
SOUTH JORDAN, UTAH 84095
PHONE (800) 552-5512

A FINANCE CHARGE OF 1.5% PER MONTH
(ANNUAL RATE OF 18%) ON THE UNPAID
BALANCE WILL BE ADDED MONTHLY.
MINIMUM CHARGE: 75 CENTS.

S DR PHIL MAMOLITO
H 114 WENDELL AVE
I PITTSFIELD MA 01201-6910
P

T
O

B Attn: Accounts Payable
I DR PHIL MAMOLITO
L 114 WENDELL AVE
L PITTSFIELD MA 01201-6910
T
O

Customer I.D.		77536		Sales Rep I.D.		Jamie Comeau		Contact Name				Due Date	
Invoice		13829497		Invoice Date		06-FEB-20		Purchase Order				07-MAR-20	
Qty		U.P.		Description / Comments		Tax		Unit Price				Extended Price	
1		4638_US		Opalescence GO 15% Mint Patient Kit 6pk - US		T		217.17				217.17	
1		4635_US		Opalescence GO 10% Mint Patient Kit 6pk - US		T		217.17				217.17	
				Saved Amount: \$76.64									

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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>. Enro

Subtotal	434.34
Sales Tax	27.14
Charges	0.00
Invoice Total	461.48
Amount Paid	\$461.48
Amount Due	\$0.00