

PLEASE REMIT ALL PAYMENTS TO: P.O. BOX 16427 JACKSONVILLE, FL 32245-6427 1-800-625-1557 or 904-641-7746 * Fax 904-641-7378

REPRINTED INVOICE

Invoice

Bill To: Ship To:

SMILES OF BAJA CA SMILES INT FOUNDATION 7668 EL CAMINO REAL 7668 EL CAMINO REAL

104-502

C/O SMILES INT FOUNDATION
CARLSBAD, CA 92009
CARLSBAD, CA 92009

 Invoice#
 Invoice Date
 Order Date:
 Cust#
 PONumber
 Terms:
 SM#

 881272
 3/30/2012
 1024614
 2/9/2012
 10741
 DUE BY 30TH
 001

881272 3/30/2012 1024614 2/9/2012 10741 DUE BY 30TH DAY

ORDERED BY AARON BICE EXPRESS SAV-N/C

BONE GRAFT ORAL SURGERY

DO NOT MAIL INVOICE EMAIL TO sthorning@sbcglobal.net

PRICING IN U.S. DOLLARS

Order	Ship	B/O	U/M	Item / Description	n / Tracking Number				Unit Price	Total Price
1	1		001	23-335-03	Loc: 001			N	107.00	107.00
				CURETTE, BRU	NS BONE, OVAL CUP, SIZE 3, SOLID	HANDL	E, 23CM,	, 9"		
				K4A	1					
1		1	001	11-932-11	Loc: 001			N		
				SCISSORS, STR	ABISMUS, STRAIGHT BLUNT/BLUNT	T, TC, 11.	5CM,4-1	/2"		
Subtotal:					\$	\$107.00				
Shipping						\$0.00	N			
Tax 1602399 PCORF				02399 PCORF		\$0.00				
Invoice Total:				otal:	\$	\$107.00		***PRICI	NG IN U.S. De	OLLARS***
	Payment at time of order:					\$0.00				
		I	nvoice E	Salance: DUE BY	30TH \$	\$107.00				
				DAY						

Visa, Mastercard and American Express Payments Accepted - call 800-625-1557 to charge by phone

IMPORTANT: THE PURCHASE AND SALE OF THE GOODS DESCRIBED ABOVE ARE SUBJECT TO THE SALES POLICY AND TERMS AND CONDITIONS OF SALE. PLEASE REQUEST A COPY OF THIS DOCUMENT IF NEEDED.

Y - taxable N- not taxable ***ALL ORDERS ARE CONFIRMED AT TIME OF ORDER PLACEMENT***

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