## **ShopADoc The Dentist Marketplace®**

## **Invoice**

Invoice #: 00119-2019

Invoice Date: Friday, October 11, 2019 Order Date: Friday, October 11, 2019

Order Number: 1638

Payment Method: Credit / Debit Card

Shipping Method:

**Bill to:**Mujahid Riaz
350 Peters St. SW
Studio City
Georgia

30313

| Description  | Qty       | Total              |
|--|-----------|--------------------|
| Single Auction Cycle Vendor: • Subscription Starts: Monday, October 7, 2019 @ 10:00 AM • Subscription Ends: Friday, October 11, 2019 @ 9:30 AM | 1         | \$12.99            |
|  | Subtotal: | \$12.99<br>\$12.99 |

I authorize ShopADoc® to contact me as needed and permit contact info be provided to auction winner for appointment scheduling. I have read and accept user agreement and privacy policy/HIPAA policy. I certify the x-ray(s) I am uploading have been taken within 30 days of the auction. I authorize \$9.99 be charged to the above card/acct. for payment of ShopADoc® auction fee.

Full Legal Name: Mujahid Riaz legalname

Dated: Friday, October 11, 2019