

# ShopADoc The Dentist Marketplace®

## Invoice

Invoice #: 00143-2019  
Invoice Date: Monday, November 4, 2019  
Order Date: Monday, November 4, 2019  
Order Number: 1751  
Payment Method: Credit / Debit Card  
Shipping Method:

**Bill to:**  
Stefano Grossi  
11692 Laurelwood Dr.  
91604  
Studio City  
California  
97614

Description	Qty	Total
Auction Listing Fee Vendor: <ul style="list-style-type: none"><li>• <b>Auction ID:</b> 1748</li><li>• <b>Service:</b> complete denture - upper or lower</li><li>• <b>Auction Begins:</b> Monday, November 11, 2019 @ 10:00 AM</li><li>• <b>Auction Ends:</b> Thursday, November 14, 2019 @ 5:00 PM</li><li>• <b>Flash Bid Cycle (if needed):</b> Friday, November 15, 2019 from 7:30 AM to 7:30 AM</li></ul>	1	\$9.99
Auction Listing Fee Vendor: <ul style="list-style-type: none"><li>• <b>Auction ID:</b> 1750</li><li>• <b>Service:</b> complete dentures - upper &amp; lower</li><li>• <b>Auction Begins:</b> Monday, November 11, 2019 @ 10:00 AM</li><li>• <b>Auction Ends:</b> Thursday, November 14, 2019 @ 5:00 PM</li><li>• <b>Flash Bid Cycle (if needed):</b> Friday, November 15, 2019 from 7:30 AM to 9:30 AM</li></ul>	1	\$9.99
<b>Subtotal:</b>		<b>\$19.98</b>
<b>Total:</b>		<b>\$19.98</b>

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: Stefano Grossi  
Dated: Monday, November 4, 2019