ShopADoc The Dentist Marketplace®

Invoice

Invoice #: 00147-2019

Invoice Date: Tuesday, November 5, 2019 Order Date: Tuesday, November 5, 2019

Order Number: 1759

Payment Method: Credit / Debit Card

Shipping Method:

Bill to: Mujahid Riaz 1 Main St Studio City California 95131

Qty	Total
	\$7.00
Subtotal:	\$7.00 \$7.00
	1

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 xray(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: Tuesday, November 5, 2019