

ShopADoc The Dentist Marketplace®

Invoice

Invoice #: 00107-2019
Invoice Date: Monday, October 7, 2019
Order Date: Monday, October 7, 2019
Order Number: 1589
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: Thursday, October 10, 2019 @ 5:00 PM	1	\$12.99
Subtotal:		\$12.99
Total:		\$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

Dated: Monday, October 7, 2019