

## ShopADoc The Dentist Marketplace®

### Invoice

Invoice #: 00077-2019  
Invoice Date: Saturday, September 14, 2019  
Order Date: Saturday, September 14, 2019  
Order Number: 1456  
Payment Method: Credit / Debit Card  
Shipping Method:

**Bill to:**  
Jason Smith  
14917 London Lane  
Bowie  
Maryland  
20715

Description	Qty	Total
Auction Listing Fee Vendor: <ul style="list-style-type: none"><li>• <b>Auction ID:</b> 1454</li><li>• <b>Service:</b> removal 1 tooth</li><li>• <b>Auction Begins:</b> Monday, September 16, 2019 @ 10:00 AM</li><li>• <b>Auction Ends:</b> Thursday, September 19, 2019 @ 5:00 PM</li><li>• <b>*Flash Bid Cycle:</b> Friday, September 20, 2019 from 7:30 AM to 9:30 AM</li></ul>	1	\$9.99
Auction Listing Fee Vendor: <ul style="list-style-type: none"><li>• <b>Auction ID:</b> 1455</li><li>• <b>Service:</b> removal 1 tooth</li><li>• <b>Auction Begins:</b> Monday, September 16, 2019 @ 10:00 AM</li><li>• <b>Auction Ends:</b> Thursday, September 19, 2019 @ 5:00 PM</li><li>• <b>*Flash Bid Cycle:</b> Friday, September 20, 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: Jason Smith

Dated: Saturday, September 14, 2019