

Dental Fix RX

318 John R. Road
 Suite 317
 Troy, MI 48083
 Tel: (800) 586-0340 Fax: (800) 586-0341
 dan.sweet@dentalfixrx.com
 www.dentalfixrx.com



Invoice

Date: 2/12/2025

TO:
 FRANK KIZY
 DELUXE DENTAL - FLINT
 3769 South Dort Highway
 Flint, MI 48507
 Tel: 810-820-7766

V

Invoice NO.:006-11716
 Ticket:636923
 Customer ID:5099055C
 Van:DFRX 006
 Payment Terms:Due upon receipt
 DUE DATE: 2/12/2025

Item	Description	Qty	Price	Total
Labor	Same Day Service Call to Replace Amalgam Separators. Replaced 2 units. Installed 1 new unit. Capped old separators to prevent biohazard leakage.	5	\$239.00	\$1,195.00
Amalgam Separator	New Amalgam Separator for 1-4 Chairs Make:Solmetex Model:NXT Mini	1	\$900.00	\$900.00
Amalgam Separator	Parts Required for Amalgam Separator Replacement. Plumbing fittings, Spa Flex Line, Fasteners, etc.	1	\$140.00	\$140.00
Other	Travel Fee	2	\$75.00	\$150.00

Subtotal	\$2,385.00
Sales Tax	\$62.40
Freight	\$0.00
Total	\$2,447.40
Amount Paid	\$0.00
Balance Due	\$2,447.40

paid on
3-12-25

\$ 2,447.40

Signature

Date

We accept cash, checks, Visa, MasterCard, American Express.

Please make checks payable to Dental Fix Rx.

Returned check/NSF Fee: maximum amount allowed by state up to \$30.00. Up to 18% interest will be applied to past due invoices.

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Invoice

Date: 3/5/2025

TO:
FRANK KIZY
DELUXE DENTAL - FLINT
3769 South Dort Highway
Flint, MI 48507
Tel: 810-820-7766



Invoice NO.:006-11737
Ticket:638368
Customer ID:5099055C
Van:DFRX 006
Payment Terms:Due upon receipt
DUE DATE: 3/5/2025

Item	Description	Qty	Price	Total
Amalgam Separator	Amalgam Separator Disposal Kit Make:Solmetex Model:HG5	1	\$385.00	\$385.00
Amalgam Separator	Amalgam Separator Recycle Kit Only Make:Solmetex Model:NXT	1	\$165.00	\$165.00
Amalgam Separator	Amalgam Separator Upgrade kit	1	\$399.99	\$399.99
Subtotal				\$949.99
Sales Tax				\$57.00
Freight				\$85.00
Total				\$1,091.99
Amount Paid				\$0.00
Balance Due				\$1,091.99

paid on
8-25-25
\$ 1,091.99

Signature

Date

We accept cash, checks, Visa, MasterCard, American Express.

Please make checks payable to Dental Fix Rx.

Returned check/NSF Fee: maximum amount allowed by state up to \$30.00. Up to 18% interest will be applied to past due invoices.