Business Name: TOOTHSENSE FAMILY DENTAL Name: Stephanie Lemberis Address: 1222 State Street City: Lemont State: IL Zip: 60439 Phone: 6309149494 Fax: 6307863169 Email: stlemberis@gmail.com Comments/Notes:

Equipment: Handpiece Repair

Item #	Quantity	Make	Model	S/N	Problem
1	1	Dentsply Sirona	Cavitron Gen 139 Cable	12190	Water runs, no vibration of insert, cable disconnected

Tracking Code: 1Z65VV921213143884