

Business Name: Elevated Dental - Vail

Name: Justin Moses

Address: 2109 N FRONTAGE RD W SUITE B

City: VAIL

State: CO

Zip: 81657

Phone: 9704763991

Fax:

Email: jmosesdmd@gmail.com

Comments/Notes:

Equipment: Small Equipment Repair

Item #	Quantity	Make	Model	S/N	Problem
1	1	Dentsply			Handpiece Cable not working

Tracking Code: 1Z65VV921239117819