

Business Name: My Dental Supply
Name: Weston McCathern
Address: 100 Old Cherokee Rd. Suite F #370
City: Lexington
State: SC
Zip: 29072
Phone: 8034672889
Fax:
Email: weston.mccathern@dentalfixrx.com
Comments/Notes:

Equipment: Handpiece Repair

Item #	Quantity	Make	Model	S/N	Problem
1	1	KAVO	9NA1202804	F5295078	Low water flow

Tracking Code: 1Z65VV920305035514