Business Name: Dental Express Inc
Name: Wael Shahshouh
Address: 904 S. Roselle Rd. Unit 242
City: Schaumburg
State: IL
Zip: 60193
Phone: 8479244000
Fax:
Email: wael@dentalexpress.co
Comments/Notes:

Equipment: Handpiece Repair

Item #	Quantity	Make	Model	S/N	Problem
1	1	KAVO	Mira Lux 3 - 635B	04-1033811	CHECK - NOT WORKING
2	1	Vector	Vx9SLK	H3111336	WARRANTY (Estimate # 8424) Check Not working

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Tracking Code: 1Z65VV921227122817