

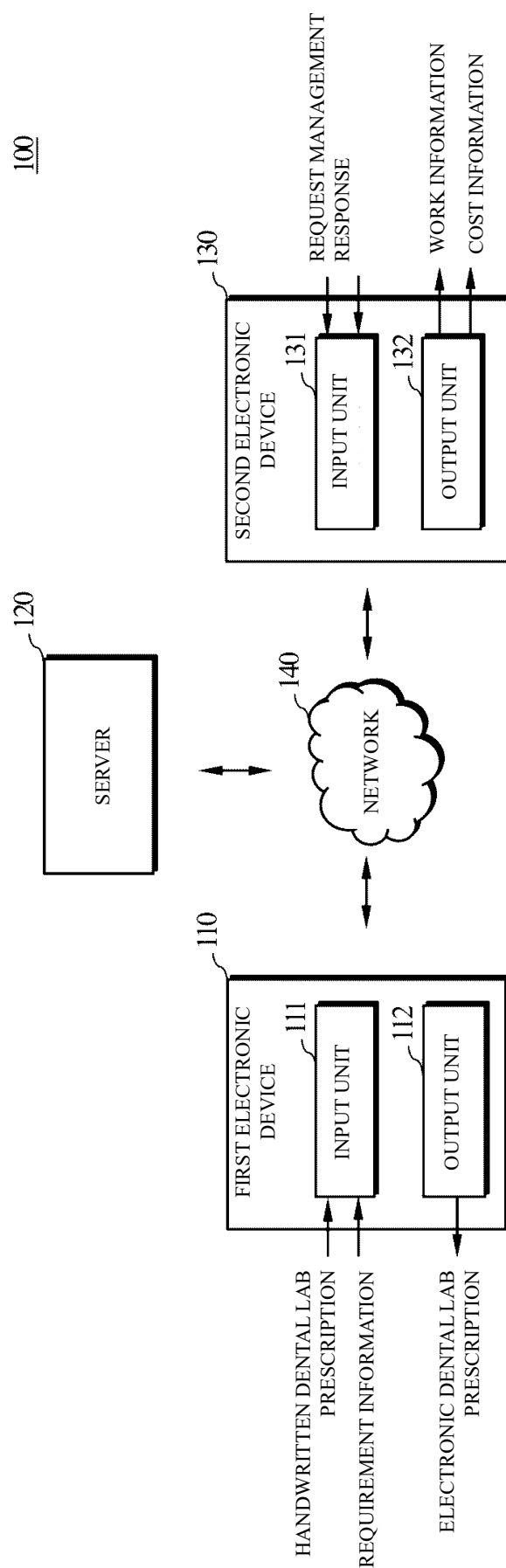


FIG. 1

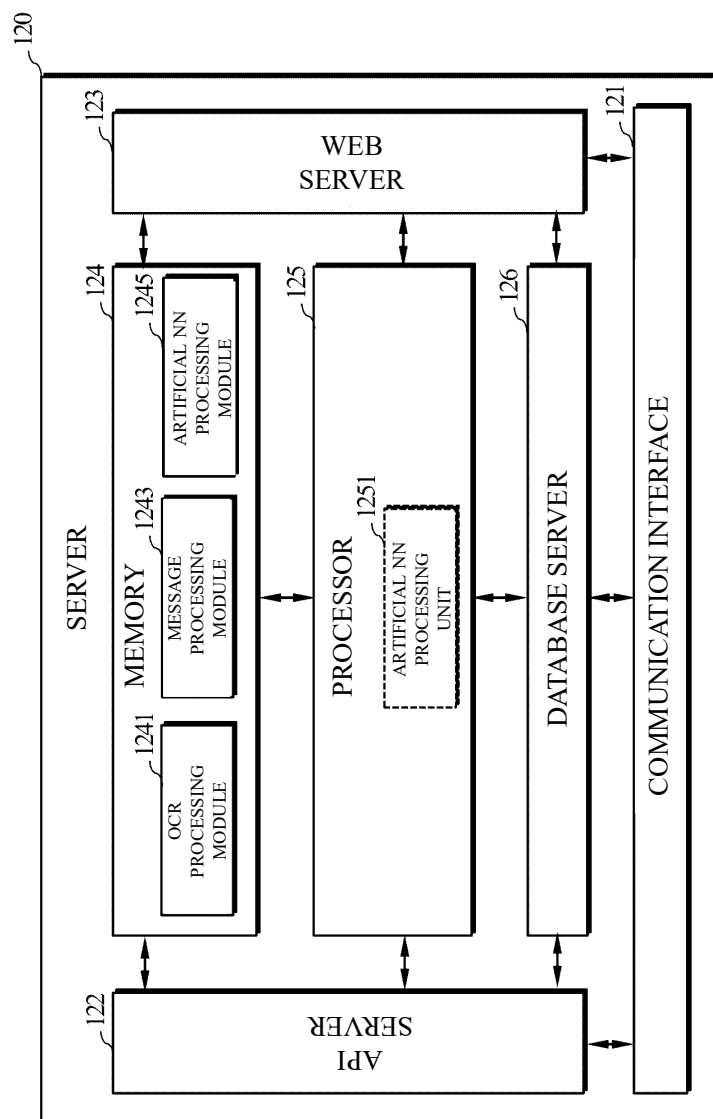


FIG. 2

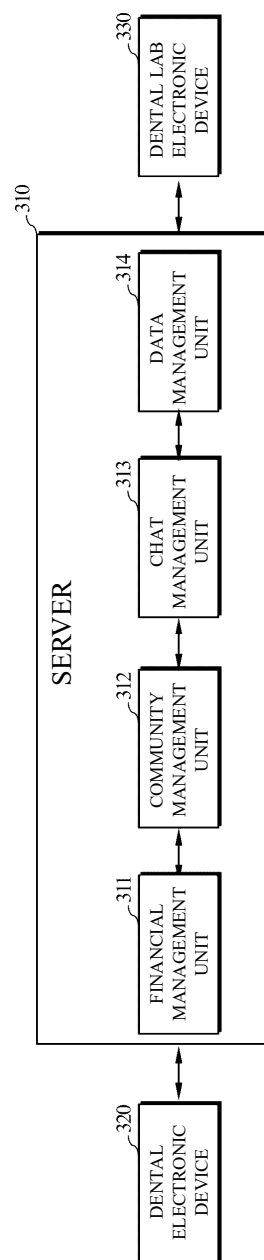


FIG. 3

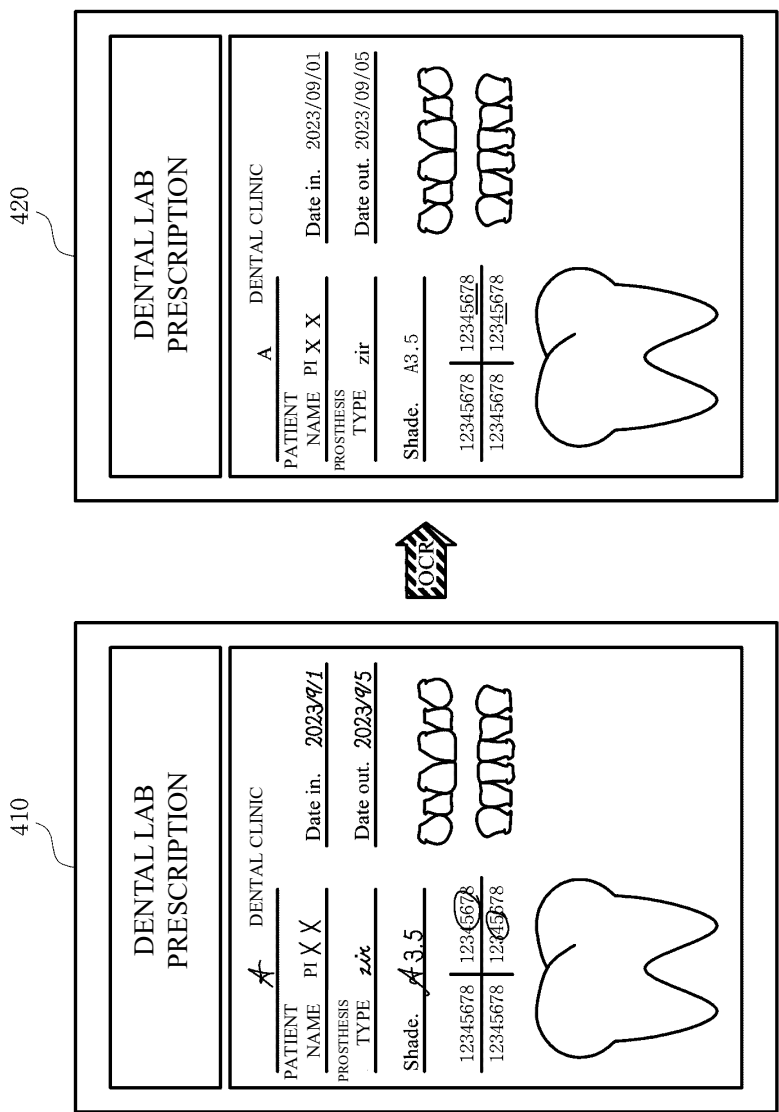


FIG. 4

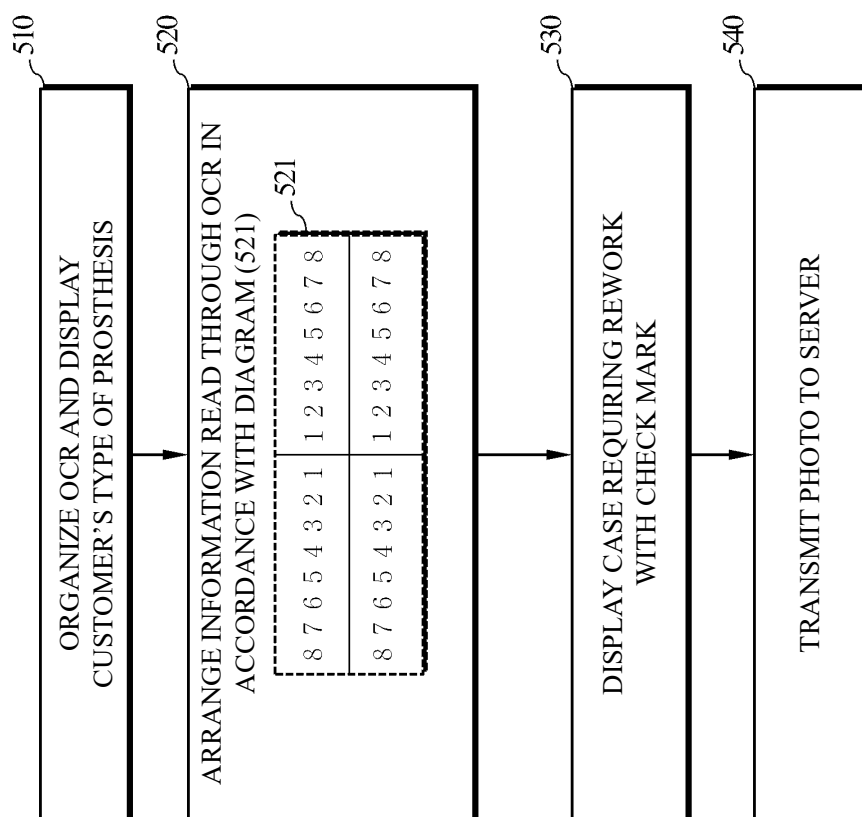


FIG. 5

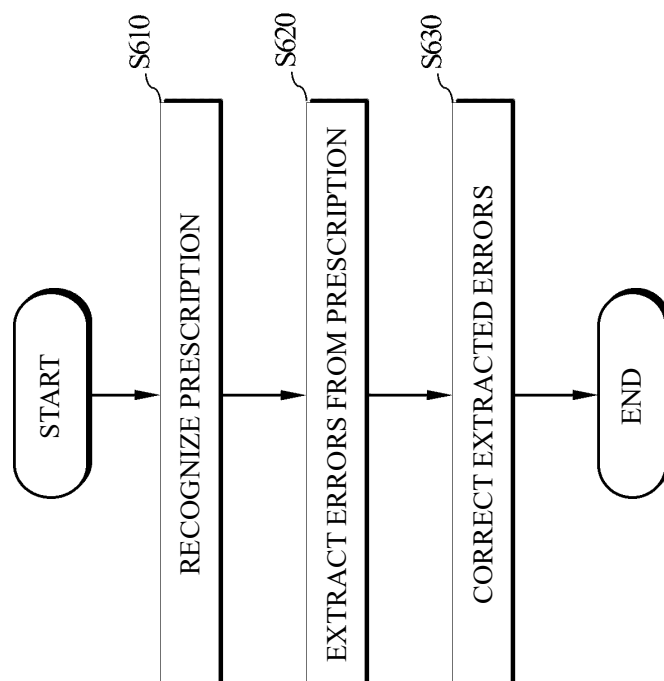


FIG. 6

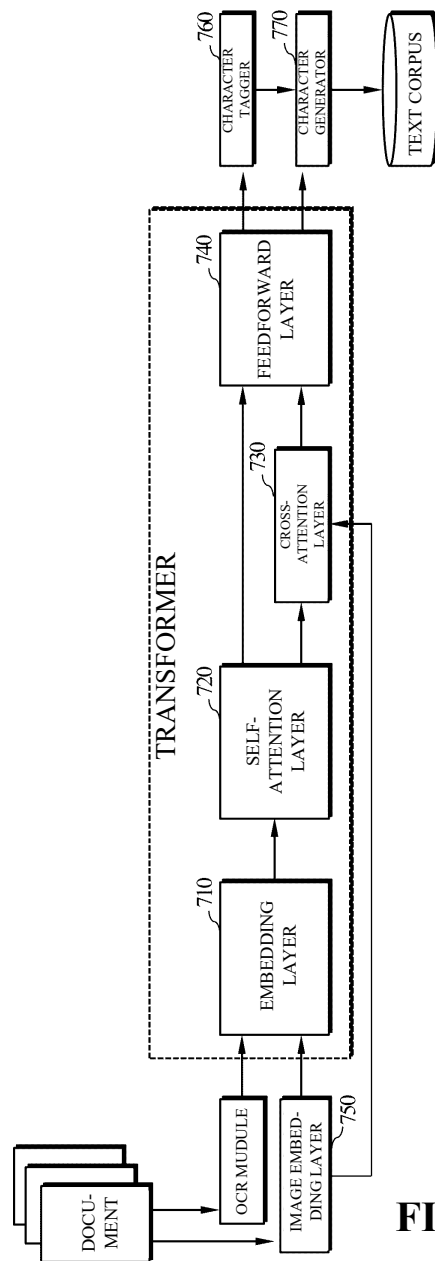


FIG. 7

LOG OUT

HAPPY CO.

TRANSACTION MANAGEMENT

PROSTHESIS MANAGEMENT

SETTLEMENT MANAGEMENT

PREScription UPLOAD

ORDER MANAGEMENT

GUIDE

010-0000-0000

SEARCH PERIOD

2023.03.05 ~ 2023.03.05

DENTAL CLINIC NAME

PATIENT NAME

SERIAL NUMBER	RECEIPT DATE	COMPLETION REQUESTED DATE	RE- WORK	DENTAL CLINIC NAME	PATIENT NAME	Shade	TOOTH IDENTIFICATION	QT.	UNIT COST	COMP- LETION	SUM	PRESCRIPTION
ZZZZA2307240008	2023.3.5	2023.3.15	☐	H DENTAL CLINIC	KIM XX	PROSTHESIS TYPE H 2	8765432112345678 8765432112345678	2	260,000	☒	260,000	DETAILS
ZZZZA2307240007	2023.3.5	2023.3.15	☐	G DENTAL CLINIC	LEE XX	PROSTHESIS TYPE G 2	8765432112345678 8765432112345678	2	250,000	☒	250,000	DETAILS
ZZZZA2307240006	2023.3.5	2023.3.15	☐	F DENTAL CLINIC	PARK XX	PROSTHESIS TYPE F 2	8765432112345678 8765432112345678	2	240,000	☒	240,000	DETAILS
ZZZZA2307240005	2023.3.5	2023.3.15	☐	E DENTAL CLINIC	SEO XX	PROSTHESIS TYPE E 2	8765432112345678 8765432112345678	2	230,000	☒	230,000	DETAILS
ZZZZA2307240004	2023.3.5	2023.3.15	☐	D DENTAL CLINIC	KANG XX	PROSTHESIS TYPE D 2	8765432112345678 8765432112345678	2	220,000	☒	220,000	DETAILS
ZZZZA2307240003	2023.3.5	2023.3.15	☐	C DENTAL CLINIC	WOO XX	PROSTHESIS TYPE C 2	8765432112345678 8765432112345678	2	210,000	☒	210,000	DETAILS
ZZZZA2307240002	2023.3.5	2023.3.15	☐	B DENTAL CLINIC	NA XX	PROSTHESIS TYPE B 2	8765432112345678 8765432112345678	2	200,000	☒	200,000	DETAILS
ZZZZA2307240001	2023.3.5	2023.3.15	☐	A DENTAL CLINIC	PI XX	PROSTHESIS TYPE A 2	8765432112345678 8765432112345678	2	190,000	☒	190,000	DETAILS

FIG. 8A

LOG OUT HAPPY CO.

TRANSACTION MANAGEMENT

PROSTHESIS MANAGEMENT

SETTLEMENT MANAGEMENT

PRESCRIPTION UPLOAD

ORDER MANAGEMENT

GUIDE
010-0000-0000

SEARCH PERIOD

DENTAL CLINIC NAME

PATIENT NAME

2023.03.05 ~ 2023.03.05

A DENTAL CLINIC

PI XX

SERIAL NUMBER	RECEIPT DATE	COMPLETION DATE	REQUESTED DATE	RE- WORK	DENTAL CLINIC NAME	PATIENT NAME	Shade	TOOTH IDENTIFICATION	QT.
ZZZZA2307240008	2023.3.5	2023.3.15		☐	H DENTAL CLINIC	KIM XX	PROSTHESIS TYPE H 2	87654321 12345678 87654321 12345678	2
ZZZZA2307240007	2023.3.5	2023.3.15		☐	G DENTAL CLINIC	LEE XX	PROSTHESIS TYPE G 2	87654321 12345678 87654321 12345678	2
ZZZZA2307240006	2023.3.5	2023.3.15		☐	F DENTAL CLINIC	PARK XX	PROSTHESIS TYPE F 2	87654321 12345678 87654321 12345678	2
ZZZZA2307240005	2023.3.5	2023.3.15		☐	E DENTAL CLINIC	SEO XX	PROSTHESIS TYPE E 2	87654321 12345678 87654321 12345678	2
ZZZZA2307240004	2023.3.5	2023.3.15		☐	D DENTAL CLINIC	KANG XX	PROSTHESIS TYPE D 2	87654321 12345678 87654321 12345678	2
ZZZZA2307240003	2023.3.5	2023.3.15		☐	C DENTAL CLINIC	WOO XX	PROSTHESIS TYPE C 2	87654321 12345678 87654321 12345678	2
ZZZZA2307240002	2023.3.5	2023.3.15		☐	B DENTAL CLINIC	NA XX	PROSTHESIS TYPE B 2	87654321 12345678 87654321 12345678	2
ZZZZA2307240001	2023.3.5	2023.3.15		☐	A DENTAL CLINIC	PI XX	PROSTHESIS TYPE A 2	87654321 12345678 87654321 12345678	2

ZZZZA2307240001

2023.03.05

2023.03.15

☐

DENTAL CLINIC

PI XX

PROSTHESIS TYPE A 2

87654321|12345678

87654321|12345678

DETAILED VIEW OF PRESCRIPTION
SERIAL NUMBER OF FILE
ZZZZA2307240001

DOWNLOAD PRESCRIPTION

DATE OF RECEIPT

A DENTAL CLINIC

DATE OF RECEIPT

REQUESTED DATE OF COMPLETION

2023.03.05

2023.03.15

TOOTH IDENTIFICATION

87654321|12345678

87654321|12345678

PATIENT NAME

PI XX

QT.

2

Shade

A2

MEMO

SAVE

CLOSE

FIG. 8B

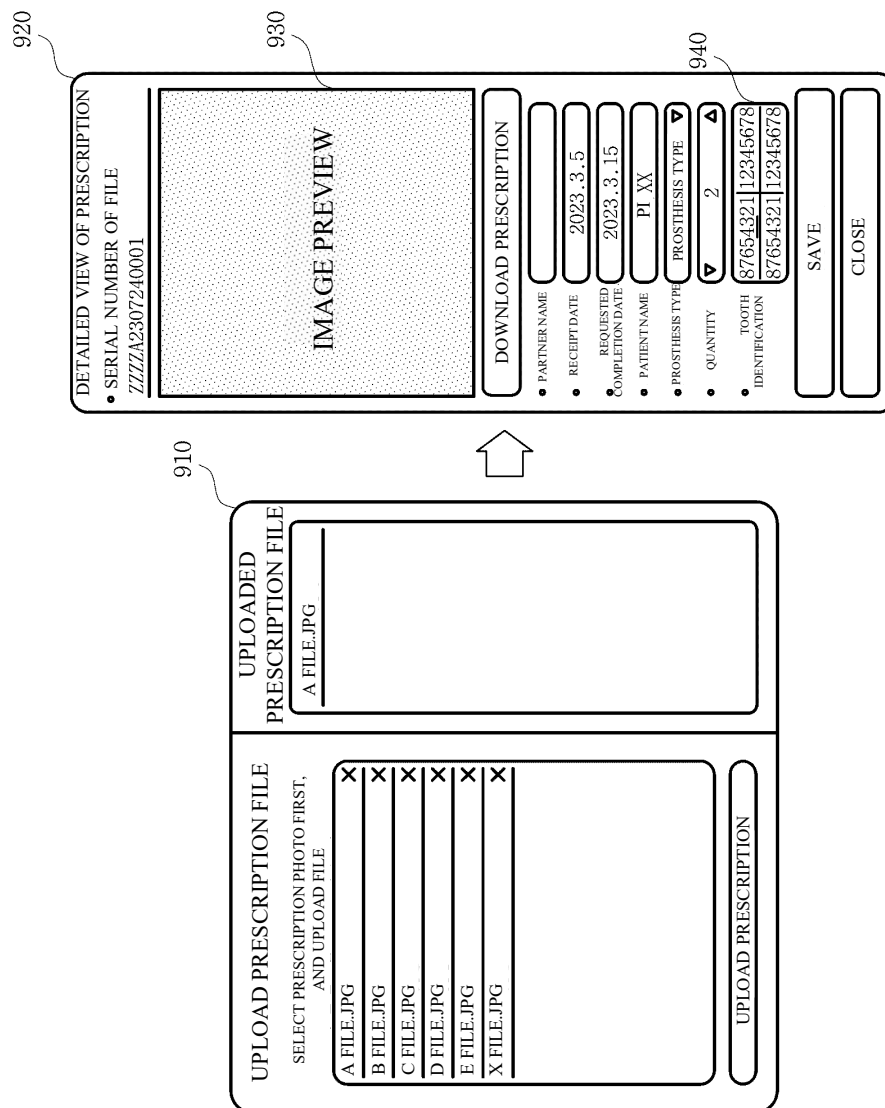


FIG. 9

1010

TRANSACTION MANAGEMENT
PROSTHESIS MANAGEMENT
SETTLEMENT MANAGEMENT
PRESCRIPTION UPLOAD
ORDER MANAGEMENT

GUIDE
010-0000-0000

ADD/MODIFY BUSINESS PARTNER

PARTNER
A DENTAL CLINIC

BANK NAME
0
%
ACCOUNT NUMBER

DISCOUNT RATE
0
%
SETTLEMENT DATE

DETAILED INFORMATION

STREET NAME ADDRESS
DETAILED ADDRESS

STREET NAME ADDRESS
DETAILED ADDRESS

BUSINESS REGISTRATION NUMBER
BUSINESS TYPE
ITEM

BUSINESS REGISTRATION NUMBER
BUSINESS TYPE
ITEM

NAME OF REPRESENTATIVE
TELEPHONE NUMBER
FAX

NAME OF REPRESENTATIVE
TELEPHONE NUMBER
FAX

NAME OF CONTACT PERSON
CONTACT INFORMATION OF CONTACT PERSON
EMAIL OF CONTACT PERSON

NAME OF CONTACT PERSON
CONTACT INFORMATION OF CONTACT PERSON
EMAIL OF CONTACT PERSON

SAVE
CANCEL

LOG OUT
HAPPY CO.

SELECT BUSINESS PARTNER
SELECT EXISTING PARTNER OR ADD PARTNER
LOG OUT
ADD PARTNER

DENTAL CLINIC ON TEST
DENTAL CLINIC ON TEST
DENTAL CLINIC ON TEST
DENTAL CLINIC ON TEST
DENTAL CLINIC ON TEST

FIG. 10

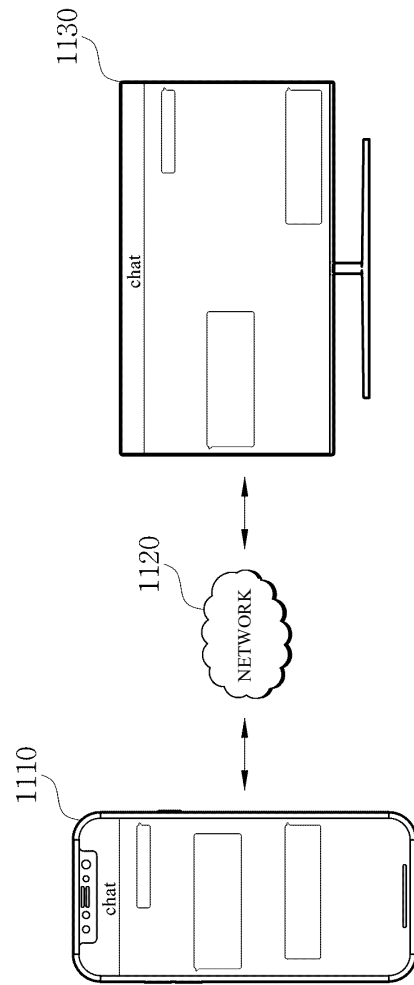
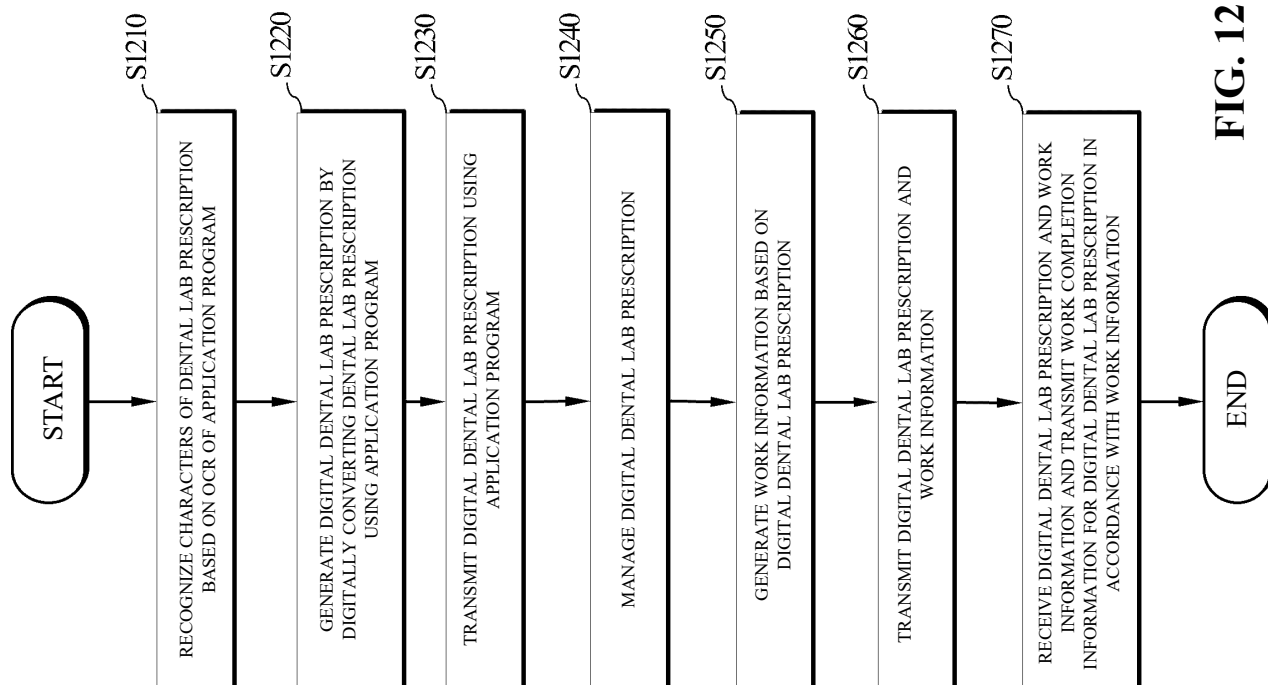


FIG. 11



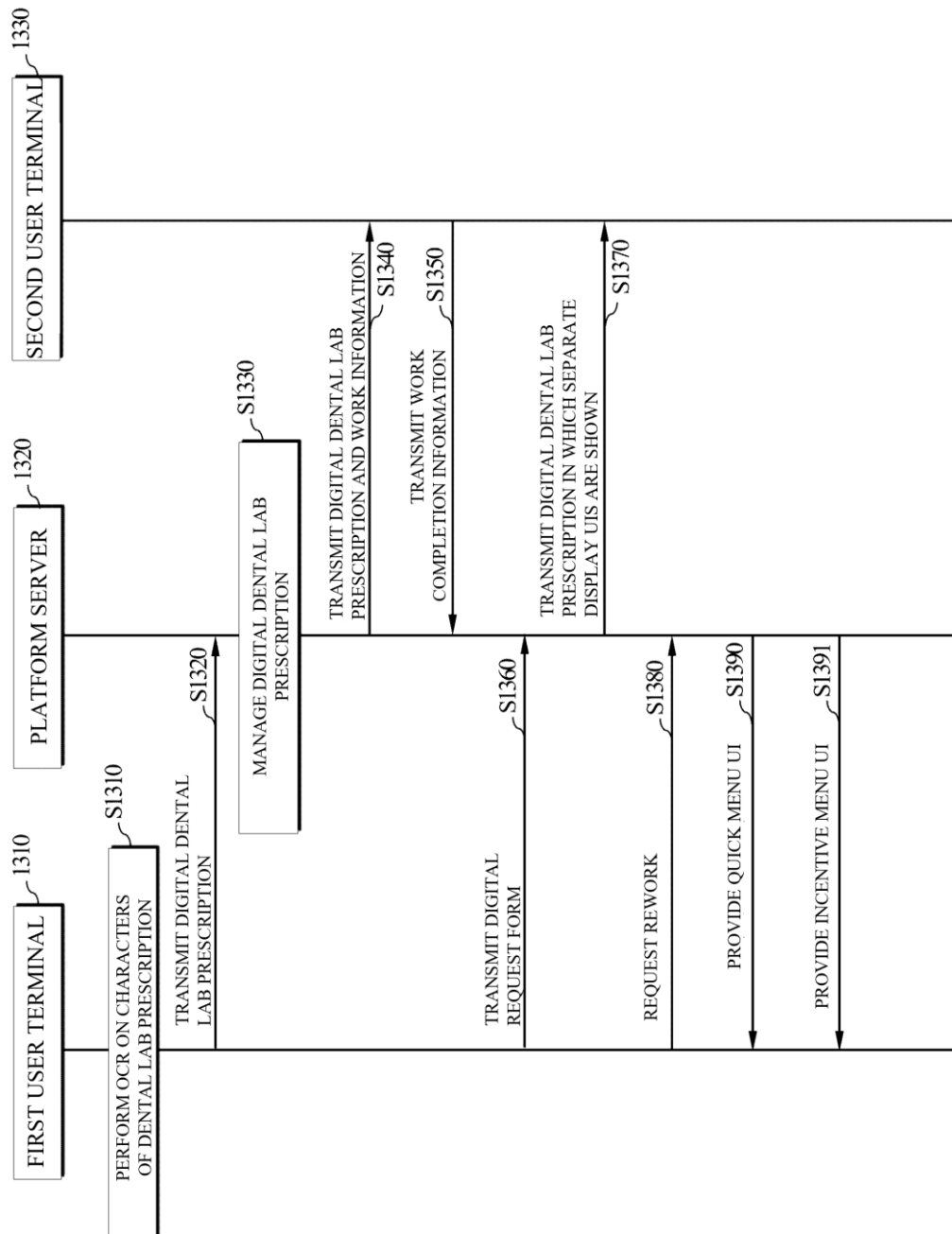


FIG. 13