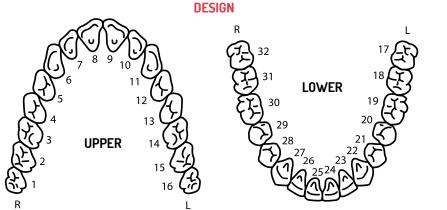


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Dr.'s Name	Phone #
Address	
Date Wanted	Patient
	□ Male □ Female Age

Payment is due upon receipt of statement. Total statement amount due by the end of the month. All past due invoices will be subject to a finance charge and/or collection fees. The undersigned is responsible both corporately and personally. Your signature is acceptance of these terms.

Dr. Signature License # Date



ENCLOSED WITH CASE:			
Impression	☐ Models	☐ Bite	☐ Photos

Other:

NEED SUPPLIES?:

□ Boxes	☐ Rx's	☐ FedEx Shipping Labels
Other:		

DENTURES/ACRYLIC PARTIALS ☐ Upper ☐ Lower Custom Tray Occlusal Rims ☐ Try-In ☐ Finish SHADE: Pink ☐ Light Meharry ☐ Dark Meharry MOULD **FLEXIBLE PARTIALS** ■ Valplast® ☐ TCS® ☐ Thermoflex - Shade **CAST PARTIALS** ☐ Vitallium® 2000 ☐ Frame with Occulsion Rim □ Gold ☐ Frame w/ Teeth Try-In ☐ Frame Try-In ☐ Finish **CLASPS:** Metal ☐ Wrought Wire ☐ Thermoflex Shade **ALL-CERAMICS** ☐ Lava[™] Esthetic ☐ Katana[™] STML ☐ Brux7ir® ☐ Amann Girrbach Zolid ☐ PF7 ☐ IPS e.max® PORCELAIN-FUSED-TO-METAL PORCELAIN TYPE: ☐ Conventional ALLOY TYPE: ■ Non-Precious ■ Noble ☐ White High Noble

FULL CAST RESTORATIONS

☐ Yellow High Noble

■ Noble White (Type II, 25% Pd)			
☐ Noble E. Gold (T	ype II, 2% Au)		
High Noble	White Gold		
■ Non-Precious	☐ Post & Core		

□ Captek™

SHADE INSTRUCTIONS

SHADE NU.	 _	
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OCCLUSAL STAINING

☐ None	☐ Light*	☐ Medium	🖵 Dark
	_		

PONTIC DESIGN

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BUCCAL MARGIN DESIGN

Metal Hairline or	mm on Buccal
Metal-Porcelain Jun	ction Margin*
Porcelain Butt Marg	in (90° Shoulder Req

	Coping with Full Porcelain Coverage
\sim	

) (لسر	Metal	Coping	with	Porcelalin	Coverage*
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☐ Metal Occlusal Excluding Buccal	Cusp
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IF NO OCCLUSAL CLEARANCE

Metal Occlusion
☐ Reduction Coping
☐ Spot Opposing

Would you like this to be a permanent note?

☐ No Yes

^{*} Standard Unless Otherwise Specified