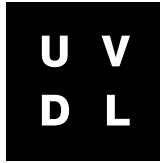


(shaded area for lab use only)

Utah Valley Dental Lab, Inc.
36 S. 300 East, Provo, UT 84606
801.373.4750 toll free 800.927.6967
fax 801.373.7074 www.uvdl.com



UTAH VALLEY
DENTAL LAB

Today's Date: _____

Appointment Date: _____ Time: _____

Dr: _____

Address: _____

City: _____ State: ___ Zip: _____ Phone: _____

Patient Name: _____ Sex: _____

Type of Restoration: _____

Shade: _____ Metal: _____ Tooth: _____

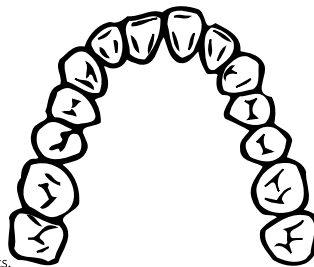
- Porcelain Shoulder Margin
- No Metal Collar
- Small Metal Lingual Collar
- Metal Lingual Collar
- Metal Margin
- 1/2 Metal Occlusal
- Full Metal Occlusal

Additional Information:

Dentist's Signature: _____

License Number: _____

Net 30 days. A finance charge of 2 percent per month will be charged on all past due accounts.
attorney's fees, and legal expenses.



RIGHT

LEFT

(shaded area for lab use only)

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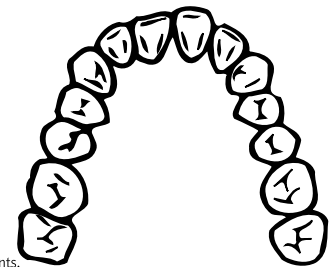
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RIGHT

LEFT