DOCTOR	IN	OUT	CASE NO.			DA	ATE RECEIV	ED
		ast College ne: 435-586	Avenue • Ced	ar City, Utah	6-3499	ΛT		
	тепу D. Ба	idwiri, CD		□ AM				
PATIENT				APPOINT	MENT DATE			
☐ Impression ☐ Bite Regist ☐ Study Mode ☐ Photos ☐ Articulator ☐ Other	ration el	Ω	WORK AUTI	00		S	HADE	
æe.max	e.max Layered Zirconia Zirconia						Full Ca	
Monolitic ると.ロ		1ax Layere		Monoliti		-	Gold Type II	
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Pontic Design	Righ	Uppe	Left	L	eft Lov	wer	Right	
	OCTOR'S SIGN Construct Preso Service Charge		r. agrees to pay acc ue balance plus co:		DR'S LICENSE in 25 days of st and reasonable			es