



Crown Plaza Dental Lab, Inc.

1.800.248.3384

1.618.345.3777

Doctor _____ Work Order Number _____

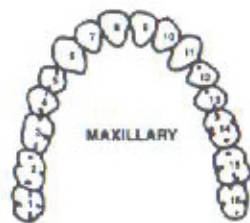
Patient _____ Age _____ M _____ F _____

Date Completed: _____

Porcelain/Shade: _____

Rx

SPECIAL INSTRUCTIONS:



MAXILLARY



SHADE GUIDE

INDICATE CHARACTERIZATIONS

PONTIAC DESIGN (CIRCLE)



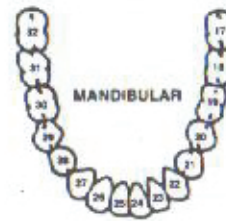
MODIFIED RIDGE LAP



CONICAL



HYGIENIC



MANDIBULAR