



# Crown Plaza Dental Lab, Inc.

1.800.248.3384

1.618.345.3777

Doctor \_\_\_\_\_ Work Order Number \_\_\_\_\_

Patient \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

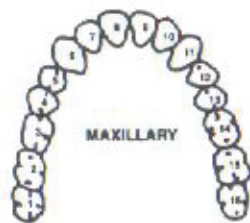
Date Completed: \_\_\_\_\_

Porcelain/Shade: \_\_\_\_\_

# Rx

SPECIAL INSTRUCTIONS:

Large empty rectangular box for special instructions.



MAXILLARY



SHADE GUIDE

INDICATE CHARACTERIZATIONS

PONTIAC DESIGN (CIRCLE)



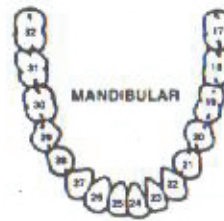
MODIFIED RIDGE LAP



CONICAL



HYGIENIC



MANDIBULAR