

## METAL FREE

- Elite Solid Zirconia
- Value Solid Zirconia
- Z-Sthetic (Full Ceramic Coverage)
- Celtra (Press)
- e.Max (Press)
- Empress
- Celtra (Milled) \*
- e.Max (Milled)

## SPLINT / SLEEP

- Comfort Zone Bite Guard
- Comfort Zone Plus
- Hard or Soft Night Guard
- Dream TAP Snore Guard
- TAP III Snore Guard
- EMA Snore Guard

## PARTIAL *ELITE* or *VALUE*

- DuraTek
- Valplast
- Acrylic
- Cast Metal
- Unilateral
- Frame Try-In
- Bite Rim
- Set-Up and or Finish
- Wire Clasps

## DENTURE *ELITE* or *VALUE*

- PALA or Avadent Digital Denture
- Custom Tray and or Bite Rim
- Set-Up and or Finish
- Reset
- Reline

## PFM

- Tradition High Noble
- Tradition Noble \*
- Value Noble
- Value Base

## FULL CAST

- Tradition HN Yellow\* / Type II / III or IV
- Value Noble Yellow
- Value Noble White

 PATIENT'S ID: \_\_\_\_\_ AGE: \_\_\_\_\_ SEX: \_\_\_\_\_

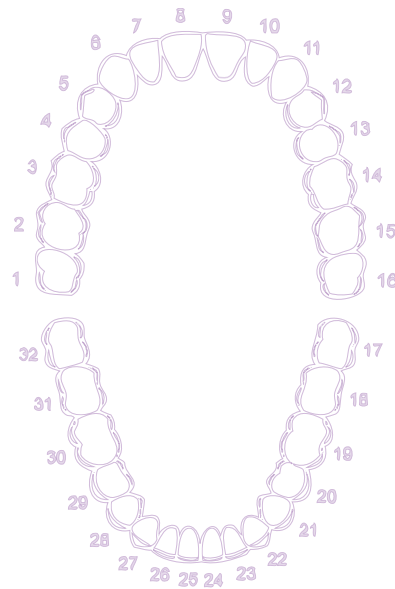
 DUE DATE: \_\_\_\_\_


 FINAL SHADE FOR CROWN / BRIDGE / DENTURE: \_\_\_\_\_


 STUMPF SHADE FOR FIXED METAL-FREE: \_\_\_\_\_

 TISSUE SHADE FOR GINGIVAL: \_\_\_\_\_

 TOOTH SHADE FOR DURATEK: \_\_\_\_\_



 CASE PHOTOS: Enclose with case or email them to drakeqc@drakelab.com

 IMPORTANT INFO FOR THE LAB: i.e: 'Pour & hold / Make elite my permanent preference / Call me!'

DR'S SIGNATURE \_\_\_\_\_ DR'S LICENSE # \_\_\_\_\_ DATE \_\_\_\_\_ PF 1/18

Virginia Use ONLY Instructions GD60-18:  Either Domestic or Overseas Lab Approved  Domestic Lab Approved  Overseas Lab Approved  Contact Me Before Subcontracting

\* Default unless otherwise specified

By signing above, I acknowledge that this represents the full complete Agreement between parties. This Agreement is subject to the terms /conditions set forth on the reverse side hereof and such terms and conditions are hereby incorporated in their entirety into the agreement.