

Due Date_____

Date Sent_____

Doctor_____

Patient_____

**Full Dentures • Valplast • Relines • Metal Frame Dentures
Zirconia • Emax • PFM • Implants • Custom Abutment**

NOTES

SHADE_____

ARDENT DENTAL LAB



15545 San Fernando Mission Blvd,
Suite A, Mission Hills, CA 91345



818-365-8765
805-638-8523



ardentdentallab.com
ardentdentallab@gmail.com