



UNIVERSAL ORTHODONTIC LAB, INC.®

11917 Front St. Norwalk, CA 90650

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1002617

LAB USE ONLY

- ☐ CONTACT ME REGARDING CASE ☐ ADDRESS CHANGE
☐ MORE LABSLIPS ☐ NEW ACCOUNT

Practice Name: **SOUTH SHORE ORTHODONTICS** Acct#: **92349**
Ship to: **2655 MERRICK RD.**
City: **BELLMORE** State: **NY** Zip: **11710** Phone: **516-783-1121**
E-Mail: **SOUTHSHORESMILESORTHO@GMAIL.COM**

Patient
First
Name

Jade

Last
Name

Guerrero

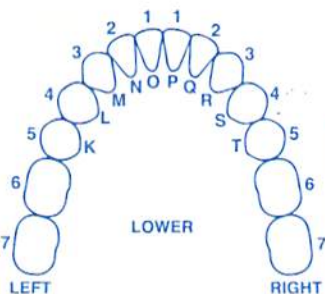
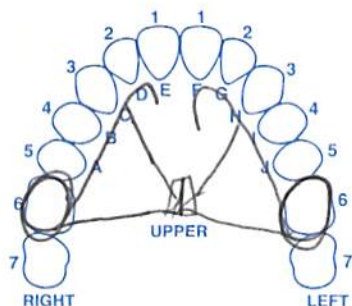
☐ Normal ☐ Rush

Date
Sent:

Due
Date:

For a normal case, please allow 7 business days.

*Should be at least 1 day before appointment date.



INSTRUCTIONS:

- ☐ Standard Hawley
☐ Ball Clasp
☐ "C" Clasp
☐ Adams Clasp
☐ Circum. Hawley
☐ Hawley w/Flat Bow
☐ Circum. w/Flat Bow
☐ Pouring (add'l fee)

Dr. Notes (Additional Instruction)

**RPE (hyrax)
with hooks extending
lingual to the
upper laterals (for
protraction).**

RMA#: (If Applicable)

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RECEIVED DATE



UL2328069

SHIP DATE

