## **MODEL SCULPTURE**

Name, Date or Code to Appear on Model (please print or type)					
Unless specified, TPO will imprint nai	me and date on upper,	and name only on lower			
☐ Stamp imprint ☐	Label				
CHECK TYPE OF SERVI  A. Pour-up alginate impressions  B. Duplicate models, add bases  Composed progressions and processions are processed processe	ons, trim, sculpture, to ses, trim, sculpture, to ses, trim, sculpture, ons — trim and file to impressions, trim, guideline for end res of cm.    two-color notitient's model.	inish, soap, imprint a finish, soap, imprint only. sculpture, imprint an oults of sculpturing.	and polish		
Send a copy of trimming instr					
	□ Yes □ No	)			
□ CENTRIC OCCLUSION □ Backs of models □ trimmed parallel	Indicated by wax bite	☐ Indicated by line on buccal surface			
TRIM MODELS (see TPO	catalog)				
☐ Trim with wax ☐ bite in place	Old Tweed height 2 3/4" high	☐ New Tweed height Base 1/3, Anaton	_		
TYPE OF TRAYS ENCLO	SED				
Upper	Lower				
SPECIAL INSTRUCTIONS					



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Phone: 800-348-8856 219-785-2591 Instructions for digital/online prescription submissions can be found at

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	t case with TP Orth	nodontics.			
☐ This is my first					
ACCOUNT NO	)				
Dr					
Address					
City					
State					
Zip	Pho	one ( )			
E-Mail					
Patient's Name_					
Date Shipped	Date Required				
		ioquiiou			
SHIPPING	·				
	□ Second Day	·			
☐ Ground	□ Second Day	□ Overnight	□ First Class		
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Dr		
Address		
City / State / Zip		
☐ Appliance Rx	☐ HERBST Rx	☐ Shipping Boxes
☐ Set-Up & Positioner Rx	☐ Perfector Rx	☐ Shipping Labels
☐ Model Sculpture	☐ Indirect Bonding Rx	☐ Shipping Bags
☐ Originator Rx	☐ Other	
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