



Laboratory Procedure Authorization	LAB REG. #
 Caputo Lab, Inc. Full Service Dental Laboratory 6732 Ridge Rd • Port Richey • FL • 34668	DATE SENT:
	TRY-IN:
	FINISH:
FROM:	MATERIAL:
STREET:	SHADE:
CITY:	MOULD:
NAME:	TYPE OF CASE:

Rx

COMPLETE DESCRIPTION

Laboratory Procedure Authorization	LAB REG. #
 Caputo Lab, Inc. Full Service Dental Laboratory 6732 Ridge Rd • Port Richey • FL • 34668	DATE SENT:
	TRY-IN:
	FINISH:
FROM:	MATERIAL:
STREET:	SHADE:
CITY:	MOULD:
NAME:	TYPE OF CASE:

Rx

COMPLETE DESCRIPTION

ADDITIONAL INSTRUCTIONS ON REVERSE SIDE	YES <input type="checkbox"/> NO
DENTIST'S SIGNATURE:	LICENSE NO.

Copies of this prescription must be maintained, either on paper or stored electronically for a period of four (4)

ADDITIONAL INSTRUCTIONS ON REVERSE SIDE	YES <input type="checkbox"/> NO
DENTIST'S SIGNATURE:	LICENSE NO.

Copies of this prescription must be maintained, either on paper or stored electronically for a period of four (4)