TERMS AND WARRANTY INFORMATION —

We honor VISA, MASTERCARD, AMEX and DISCOVER. • All cases returned via overnight courier service.

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LIMITED WARRANTY/LIMITATION OF LIABILITY. Smith-Sterling Dental Laboratories ("the lab") warrants that all dental devices (a "device") are made according to your specification and approval in the belief that the device will be useful and MAKES NO OTHER WARRANTIES INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. Subject to the return of a device that is placed and then fails, the lab will repair or replace the device without charge for the cost of materials and workmanship or refund the original price paid, at the lab's option, as follows: (1) screw-retained implant abutments up to 20 years (including replacement of a device that was made by the lab that was attached to said abutments and including an Inclusive® Tapered titanium dental implant upon request at no extra charge); (2) porcelain to metal, all ceramic, all metal, single-unit inlay, onlay and crown composite resin final prosthetics, and screw-retained crowns and implant bars, up to seven years; (3) composite resin bridges (excluding Maryland and inlay/onlay bridges) up to five years; (4) thermoformed appliances and splints if the failure is due to defects in materials or workmanship, provisionals, composite resin Maryland and inlay/onlay bridges, up to six months: (5) all other dental devices up to 30 days if the failure is due to defects in materials or workmanship. This Warranty is exclusively for your benefit, is not transferable and does not extend to any patients. You agree to pay all other costs of adjustment, repair and replacement of a device. Except where prohibited by law, the lab WILL NOT BE LIABLE FOR ANY LOSS OR DAMAGES ARISING FROM THE USE OF A DEVICE, WHETHER DIRECT, INDIRECT, SPECIAL, INCIDENTAL OR CONSEQUENTIAL, regardless of the theory asserted, including warranty, contract, negligence or strict liability and if such disclaimer is not permitted by law, the duration of any implied warranty is limited to 90 days from the date of delivery. In the event of a dispute and absent an amicable resolution the parties mutually agree to waive class actions in favor of mandatory individual arbitration of claims under this limited warranty in and in accordance with the laws of Florida. The lab does not augrantee the performance of independent carriers.



closed.

□ Upper

☐ Green

Color Options:

☐ Clear**(-\$5) ☐ Blue

**Standard unless specified otherwise

☐ Pink

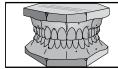
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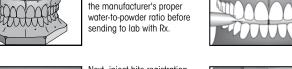
IMPRESSION AND BITE REGISTRATION GUIDELINES



Take full-arch upper and lower impressions using alginate or VPS impression



Pour wet alainate impressions with dental stone following the manufacturer's proper sending to lab with Rx.





Stone models mounted with open construction bite. Note the opening between anterior

A quick bite technique is to

place two cotton rolls behind

the cuspids and guide patient

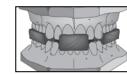
into centric relation.



With patient in open centric relation, inject bite registration into the posterior opening of both quadrants.



Next, inject bite registration into anterior opening to capture a complete open construction bite at centric



Dr Name Mrs. Joan Newcomb **SMITH-STERLING Dental Laboratories®** Acct # 10-11111Z 8880 NW 20th St. • Ste. C • Doral, FL 33172 • 800-395-8205 • Fax 800-471-9762 Patient Name www.smithsterling.com • mail@smithsterling.com • FL LICENSE#: DL 10223 First Last Male Female Age SPECIAL BITE SPLINT RX OFFER* -Enclosed with case: 🗆 Impressions 🗀 Models 🗀 Bite 🗀 Photos 🗀 Other: 1. Carefully package your case, including this Rx, and tape box securely Deliver by 5 p.m. on 2. To schedule your in-office case pickup, call 800-395-8205. 3. Please allow two working days in lab. 4. Save \$20 on one bite splint with this Rx. Use all four prescriptions for one COUPON CODE: 920 OF COLING. Sp.:.

Enclosed with case: _Impressions _Models _Bite _Photos _Other: ______ unit each for a total savings of \$80! Offer expires September 30, 2015 — *This personalized prescription is intended for the dentist and account number listed. It is nontransferable Limit one special offer per case. No copies accepted. Offer applicable for a maximum of four specially priced Rxs per account for specified products only. Special pricing not valid with any other offer. — ENCLOSED WITH CASE — LABORATORY USE ONLY — ☐ Impressions ☐ Models ☐ Bite By _____ Mail Other: **UPPER AND LOWER IMPRESSIONS OR MODELS WITH** BITE REGISTRATION REQUIRED (CHOOSE ONE) ☐ Comfort H/S™ Bite Splint (hard/soft) ☐ Comfort Bite Splint (hard) \$64 ... you pay \$44* \$**54...** you pay \$**34*** ☐ Lower Upper ☐ Lower

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Signature

(see reverse for limited warranty details)

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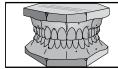
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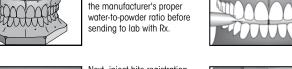
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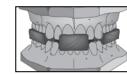
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