Smile Orthodontics

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| --- | --- |
| Onboarder : Rachel | Designer: undefined |

Screenshots

Home : http://screenshot.com/

Interior : http://screenshot.com/interior

|  |  |
| --- | --- |
| Doctor : Doctor Name | How many doctors: 3 |

|  |  |
| --- | --- |
| Practice Name : Smile Orthodontics | Contact Name: Bob Smith  Contact Email: info@baymeadowsorthodontics.com  Contact Number: 6506381500 |

|  |  |
| --- | --- |
| Address : 15931 Hesperian Blvd. | How many offices: undefined  Dear Doctor ID : 125684 |

|  |  |
| --- | --- |
| Practice Email : info@baymeadowsorthodontics.com |  |

Copywrite Section

Current Site URL : http://www.oursite.com

Client Login Information

Username : smileortho

Password : %fdw84

Notes : test

Designer Section

Notes : test

Special Notes :

* undefined

Developer Section

Notes : test

**Site Architecture**

**Site Architecture Key:** ( Std = Standard text/ Cst = Custom / DD = Dear Doctor/ SVP = Standard Vendor Page )

|  |  |
| --- | --- |
| **Home** |  |
| - |  |

|  |  |
| --- | --- |
| **Office Info** |  |
| - **test2** |  |
| - **test3** |  |

|  |  |
| --- | --- |
| **Contact** |  |
| - |  |