

Artistic Dental Laboratories is **GOING GREEN** by **January 1**, **2020**. Join us in this new adventure.



STATEMENTS

We will need your main email and any other email to which you would like your statements sent. Complimentary paper statements will be discontinued as of **January 1, 2020.**

Doctor Name:	
Account ID:	
Email 1:	
Email 2:	
Email 3:	

AUTO PAY

We have options available to have your account automatically paid on the 10th or 15th of every month. Just provide credit card information.

CHECK ONE:	☐ AUTO 10 TH	☐ AUTO 15 TH
Credit Card #:		
Exp. Date:	Securit	ty Code:
Zip Code:		

Doctor's Signature over Printed Name