
Patient Name

I'm an orthodontic patient of Dr. Nicole Eberle and can earn rewards for visits to your office for routine cleanings. Dr. Eberle recommends that I schedule with you every six months. By bringing this certificate to my next orthodontic appointment, I can earn Eberle Tokens to redeem for prizes!

Thank you for completing this voucher!

THIS CERTIFIES THAT THE ABOVE PATIENT HAS COMPLETED THE FOLLOWING:
(Please check all that apply)

- Dental Exam No Cavities
 Cleaning Requested Treatment Completed

Dentist initials: _____ Date: _____

Comments: _____



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