



Great Hygiene Makes Great Smiles

Patient's Name

I'm a patient of Floyd Family Orthodontics and earn rewards points for seeing your office on a regular basis.

Bringing in this Dental Reward Certificate at my next orthodontic appointment guarantees points will be added to my rewards.

Thank you for completing this certificate!

This certifies that the above patient has completed the following:

(Please circle all that apply)

Dental Exam Cleaning No Cavities Requested Treatment Complete

Still Needs: _____

Dentist or Hygienist Initials: _____ **Appointment Date:** _____

Dr. or Practice Name: _____

Dr. Daniel Floyd, DMD, MS. & Dr. Lindsey Reinhardt, DMD, MS.

floyd family orthodontics

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