



# CERTIFICATE OF CLEANING

---

PATIENT NAME

In recognition of the fact that your oral health is especially important to Dr. Webb, Dr. Schliep, and your dentist, please take this certificate with you to your next cleaning appointment. Have this certificate signed by your dentist or hygienist and return to Webb Orthodontics to receive a gift card for a special treat!!!

---

DENTIST/HYGIENIST SIGNATURE

---

DATE

