



**Casey Patterson, DDS**  
2925 Sycamore Drive, Suite 107  
Simi Valley, California 93065

## Dental Materials Fact Sheet

---

In signing below, I acknowledge receipt of the Dental Materials Fact Sheet provided by Casey Patterson, DDS. I have had the opportunity to review the material provided and have my questions answered.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date