

Certificate

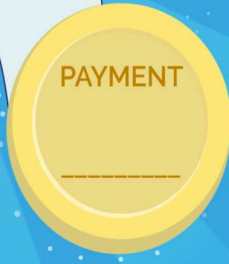


This is to Certify
The receipt of ____ Teeth

Owner's name _____

Age _____

Date _____



Certificate

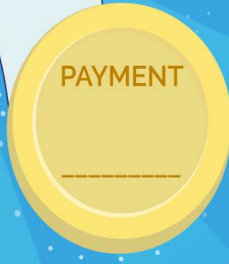


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