



Date _____ PMRS Account Rep Name: _____ PMRS Account Rep Phone: _____

Contact Information

First Name _____ Last Name _____
Business _____
Address 1 _____ Address 2 _____
City _____ State _____ Zip _____
Phone _____ Email _____

Description of Material Shipped

Unit of Measure (check one):

☐ GRAMS

☐ TROY OUNCES (31.1 Grams)

Jewelry <i>*Must send in dental scrap to refine jewelry</i>	Weight (approx.)	Dental Practice	Weight (approx.)	Dental Lab	Weight (approx.)
10K	_____	Crowns/ Bridges/PFMs	_____	Crowns/Bridges	_____
14K	_____	Gold/ Palladium Alloy	_____	Grindings! E Waste	_____
18K	_____	Silver alloy	_____	Flash	_____
Mix Karat	_____	Gold Sponge or foil	_____	Sprues	_____
Other	_____	Other	_____	Vacuum Bags	_____
				Other	_____

Notes: _____

**We do not accept amalgam in any form, nor do we accept X-ray film, mercury, traps, or separators. Please ensure all dental scrap is free of liquids before shipping.*

Payment Delivery (select one)

☐ U.S. Mail

☐ Wire (\$35 fee)

☐ ACH (\$10 fee)

☐ Overnight Check (\$50 fee)

☐ 2-Day (\$15)

PAYABLE TO: _____

Bullion / Coin Exchange (Priced at a variable premium above spot)

GOLD

☐ Bullion

☐ American Eagle

☐ Canadian Maple Leaf

☐ Krugerrand

SILVER

☐ Bullion

☐ American Eagle

NOTE: Difference in the value of your shipment and selected bullion will be paid by check.

CASTING GRAIN

☐ 24K Gold

☐ .999 Silver

