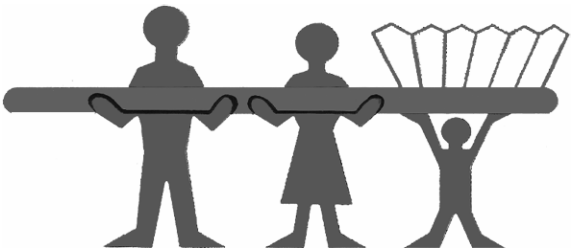

Dr. David J. Campbell, DDS
7110 Highland Road
White Lake, MI 48383-2851
(248) 887-8387 Phone
(248) 889-5842 Fax

Dental Insurance Information

Are you currently eligible for any dental insurance benefits? ☐ **Yes** ☐ **No**

Insured's Name _____

Relationship to you _____

Insured's Birth Date _____/_____/_____ **Insured's Social Security Number** _____
Month Date Year

Insured's Address _____

_____ **Telephone ( )** _____

Insured's Employer _____

Employer's Address _____

_____ **Telephone ( )** _____

Insurance Company _____

Insurance Policy Number or Group Number _____

If applicable, please provide information for <u>secondary</u> insurance coverage:

Insured's Name _____

Relationship to you _____

Insured's Birth Date _____/_____/_____ **Insured's Social Security Number** _____
Month Date Year

Insured's Address _____

_____ **Telephone ( )** _____

Insured's Employer _____

Employer's Address _____

_____ **Telephone ( )** _____

Insurance Company _____

Insurance Policy Number or Group Number _____