Dental Specialties of Saint Louis University Orthodontic Clinic

ASSIGNMENT OF BENEFITS AGREEMENT

	our insurance receive at Dental Specificalties of Saint Louis Universinsuisadecei beillingup wohledeures protesi bekerifför approximent overage.	sity.	no
, we will pro	nto a dispute with your insurance company over a claim; ovide necessary documentation your insurance company requests exem phymestimus that company reduction by its will insure the company of the compa		
und fitst directly above natal Sipie constatile she fels y intuition is directly ance company to			
	Deticate/Decorate/lab Deute Circustum	Date	
	Patient/Responsible Party Signature:	Date:	