

# ADVANCED CARE DENTAL

THERESA GARDOCKI, DDS  
600 PLEASANT OAK DR  
OREGON, WI 53575

WWW.DRGARDOCKI.COM  
608-835-3388

Complete  
Dental Care  
for the  
ENTIRE  
Family!

## ASSIGNMENT OF BENEFITS

I hereby authorize payment of dental/medical benefits to **Advanced Care Dental, Dr. Theresa Gardocki**, or the services described.

I give my permission to the doctor to submit insurance benefit claim forms in my name and on the behalf of myself, my spouse and/or my minor children.

I realize that I am responsible for and agree to pay any charges not covered by my insurance. This includes unmet deductibles, non-covered services, etc.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_