

Paul J. Kramer & James K. Kramer

www.drjameskramer.com

13 S. Main Street | P.O. Box 348 • Selbyville, DE 19975

info@kramerdmd.com

(302)436-5133

Paul J. Kramer, D.M.D
James K. Kramer, D.M.D., P.A.

Request for Release of Previous Dentist Information

Date: _____

I, (your name) _____,
hereby authorize (previous dentist) _____
(phone number) _____

to release and email information related to my health history, treatment status, copies of my X-rays, health records, and any test results to:

Signature _____ Date _____

Paul J. Kramer, D.M.D.
James K. Kramer, D.M.D., P.A.
13 South Main Street
P.O. Box 348
Selbyville, DE 19975
Email: info@kramerdmd.com

Response Date: _____