

UNIVERSITY SQUARE DENTAL ASSOCIATES
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RECORD REQUEST

Please send all my dental records to the following dental office:

University Square Dental Associates
Kristen Leong, DMD, LLC
3901 Market Street, Box 1936
Philadelphia, PA 19104

Original radiographs are requested:

Or email at:

UniversitySquareDentalAssc1@gmail.com

Patient Signature

Date

Patient Name (print)