INSURANCE CO ENCOUNTER REPORT

Company Name: Metropolitan Life

07/07/07 TO 01/07/13

Practice: Demonstration Dentist
Tax ID: 999999999 — CT Tax ID: 999999999

PATIENT NAME/ PAT SSN/ DOS/ TH/ FEE/
ID EMPLOYEE NAME EMPL SSN DOB CODE DESCRIPTION SURF RVU COPAY

Total Patients seen:

Total procedures performed:

Total Amount charged to patients:

\$0.00

NOTE: RVU's are the Time Units from the current ADA file.

