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PAYMENT OPTIONS

Dental treatment is an excellent investment in the overall dental, medical and psychological well being of children and adults. Financial considerations should not be an obstacle to obtaining this important health service. We are sensitive to the fact that different people have different needs in fulfilling their financial obligations; we are providing the following payment options.

Patient Name: _____ Date _____

The total fee for dental treatment is	\$ _____
Less estimated insurance*	\$ _____
Patient responsibility	\$ _____

Treatment times differ from patient to patient. These payment options do not correspond to the estimated treatment time but are merely provided for your convenience.

Option A: PRE-PAY

A 15% bookkeeping discount, or \$ _____ is offered off the patient's portion of the Total fee when payment is made in full by cash or check at the start of treatment, resulting in a one-time payment of \$ _____. 5% or \$ _____ if by credit card. This results in a payment of \$ _____.

Option B: IN OFFICE FINANCING/PAYMENT PLANS

\$ _____ down payment and \$ _____ per month for _____ months.

Patient Signature _____ Date _____