

This form was approved. Please see the bottom section for details.

## Student/Patient Info

Date: 2021-02-18

Year: D3

Patient's Name: Bob Vance

Procedure for requested funds: Root Canal

Cost of procedure: 500

Dental coverage: Yes

Reason for choice of student: Ginger Vitis is a top student, she deserves this.

Team Mentor/Prosthodontist Approval: Yes

Is this an Emergency Procedure: Yes

Justification: None needed. We are only asking for \$200.

Student's Name: Ginger Vitis

Team Mentor/Prosthodontist Name: Dr. Tooth

Chart #: 123456

Procedure Code: 123456

Amount of request: 200

Insurance Provider: Apple'a'Day Limited

Reason for choice of patient: He can't afford it.

Team Mentor/Prosthodontist Swipe Card #: 123456

Approved procedures that apply: ["Relief of pain and related diagnostic procedures (e.g. examination, radiographs, endodontic opening limited to anterior teeth only, I&D, extraction)."]

Offer Expires On: 2021-03-05

## Approval and Fund Info

Approved by: Griffin Swanson

Approved on: 2021-02-18T22:26:02Z

Selected Fund: Dr. Donald B. Proctor Patient Fund

Additional Comments and Approved Fund Amount: Good work Ginger. You have been approved for \$200 as requested.