



K. EDWARD OPPERMAN, D.D.S., F.A.G.D.

DARREN REDMAN, D.D.S., M.B.A.

PREVENTIVE, COSMETIC AND FAMILY DENTISTRY

Date: _____

To: _____

Re: _____

Please forward records on the above named patient(s) to the office of
K. Edward Oppermann, D.D.S., F.A.G.D. and Darren Redman, D.D.S., M.B.A.

You can also e-mail these records and x-rays to: Records@kingwoodsmiles.com.

Your cooperation in this matter is greatly appreciated.

Patients Signature
(Parent or Guardian)