

Golden Oak Dental Care
11345 N. Port Washington Rd.

Mequon, WI 53092

Dr. Stephan W. Klug

262-241-4440 / 262-241-3331 (fax)

goldenoakdental@gmail.com

AUTHORIZATION TO RELEASE RECORDS

Office requested information from:

Dr. _____

Address _____

City _____ **St** _____ **Zip** _____

Telephone # _____

***I hearby authorize and request the release of records or copies of such records;
including x-rays(BWX 2 yrs old or less and Pano/FMX 3 yrs or less),
dental/medical treatment and history to address listed above***

Signed: _____

Name of other family members: _____

Please email to above email address whenever possible