



DIANA SMITH, DDS

Karim Banani DDS and Diana Smith DDS

6410 Fannin St # 800, Houston, TX 77030

(713) 797 0840

www.dianasmithdds.com/contact.html

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INSURANCE INFORMATION

Created at: **02/12/2020**

Primary Insurance

Patient's relationship to the Insurance Holder	
Insurance Holder's name	
Insured Date of Birth	
Insured Address	Same as home address
Insured Employer's Name	
Dental Insurance Company	
ID Number	
Group Number	
Insurance Plan Name	

Primary Insurance Information

Insurance Phone Number	
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Secondary Insurance Information

Insurance Phone Number	
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