

Sheet1

FA	FAM	DATE	DFIRST,C,	LAST,C,	TRAN:	TRANSDESC,C,20	FEE,N,	TOOTH,C,2	SURFACE,C,CL
1	1		### PETER	SMITH	1110	ADULT PROPHY	25.00		Y
1	1		### PETER	SMITH	272	2 BITEWINGS	25.00		Y
1	1		### PETER	SMITH	120	PERIODIC ORAL EXAM	25.00		Y

Sheet1

CL/CLAIM3,C,1	IN\$IN\$INSNO3,C,3	INSE\$INSE\$INSE\$EMEMMMI,C,10	MMIPERSON,DOCTOR,C,2
H	3 2	22.50 2.50 0.00 1 2 0	
H	3 2	22.50 2.50 0.00 1 2 0	
H	3 2	22.50 2.50 0.00 1 2 0	

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RECALLDT,D DELCODE,C,1 INSDR,C,2 BILLDR,C,2 MMIDR,C,2 DUMMY,C,1