



NAME [REDACTED]

ADDRESS [REDACTED]

PHONE [REDACTED]

10 yrs.

REFERENCE [REDACTED]

APPROX. FEE
Dr. May 11/66

X [REDACTED] X

OPERATIONS				YEAR <i>May 17 1962</i> LEDGER RECORD						
				DATE	TOOTH NO.	OPER NO.	HOURS	DEBIT	CREDIT	REMARKS
1	CONSULTATION	13	X-RAY							
2	PORCELAIN INLAY	14	ROOT CANAL TREAT.	<i>May 17/62</i>		<i>5/1</i>				
3	GOLD INLAY	15	ABSCESS	<i>May 18/62</i>	<i>30</i>	<i>6.7</i>				
4	SILICATE FILLING	16	ROOT CANAL FILLING	<i>May 18/62</i>	<i>57</i>	<i>2.7</i>		<i>3 (root only)</i>		
5	GOLD FILLING	17	PROPHYLAXIS	<i>May 18/62</i>	<i>14</i>	<i>2.7</i>		<i>33 (22 only)</i>		
6	CEMENT FILLING	18	CORRECT OCCL.	<i>May 18/62</i>	<i>19</i>	<i>6.7</i>		<i>17</i>		<i>Bill</i>
7	AMALGAM FILLING	19	PYORRHEA TREAT.	<i>May 18/62</i>						
8	GUT TCHA	20	PREP'D & SEPARATED	<i>May 18/62</i>			<i>1</i>			
9	TEN. KY FILL.	21	PREP. FOR GOLD CR.	<i>May 18/62</i>			<i>1</i>			
10	PULP CAPPING	22	FITTED CR. FOR BRIDGE	<i>May 18/62</i>			<i>17</i>			<i>Bill</i>
11	DEVITALIZ TREAT.	23	INSERTED BRIDGE	<i>May 18/62</i>			<i>1</i>			
12	EXTIRPATION OF PULP	24	GOLD CROWN	<i>May 18/62</i>			<i>1</i>			

FORM 9-E