



DENTISTRY on LAWRENCE
Family & Cosmetic Dentistry

Dr. Jeff Sumner

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To Whom it May Concern,

_____, requests the release of his/her dental records and radiographs to Dentistry on Lawrence. **Please email the most recent BW's/PAN, thank you.**

Dentistry on Lawrence

Dr. Jeff Sumner & Associates

232 Lawrence Avenue

Kitchener, ON N2M 1Y4

(519) 744-6533

drjeffsumner@kitchenerdentistry.ca

Patient Signature: _____

Office Verification: _____

Name of Previous Dentist: _____