



EXHIBIT B

GROUP HEALTH INCORPORATED (GHI)*

ASSOCIATE DENTIST(S) LIST:

Practice Name:
Owner Name:
Address:
City, State, Zip:
Phone:
Fax:

TIN #:
Check Payable to:

THE FOLLOWING DENTISTS ARE AFFILIATED WITH THE PRACTICE LISTED ABOVE:		
Name:	Specialty:	License #:
Name:	Specialty:	License #:
Name:	Specialty:	License #:
Name:	Specialty:	License #:
Name:	Specialty:	License #:
Name:	Specialty:	License #:

* GHI is an EmblemHealth company.

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