Rutherfordton Area General Dentistry

FINANCIAL DATA SUMMARY FOR PRACTICE 8717 10/9/2015 12:16

The following summary illustrates a projected year's income and expenses for the subject practice which incorporates an increase in fees and overhead expense but no increase in production. This summary is not a representation or warranty of future practice performance. Purchasers should obtain qualified legal and accounting counsel prior to any purchase decisions. **NOTE: Practice price does not include accounts receivable.**

			•	Purchasers should obtain qualified	•	nting
				e price does not include account		
PRACTICE INCO		200.0101101		- p account		
EXPECTED GRO		IONS			\$712,386	100.0%
	HYGIENE CO				\$163,849	23.0%
	DENTIST CO				\$548,538	77.0%
		RETAINED SI	ELLER		, , , , , , , , , , , , , , , , , , , 	
		ASSOCIATE				
		PURCHASER			\$548,538	77.0%
VARIABLE EXPE	NSES					
	WAGES, PAY	ROLL TAX, ET	C.		\$164,034	23.0%
	LABORATOR'	Y			\$14,695	2.1%
	CLINICAL SUI	PPLIES			\$36,261	5.1%
	OTHER VARIA	ABLE EXPENS	SE		\$67,786	9.5%
TOTAL VARIABLI					\$282,775	39.7%
						33.17
FIXED EXPENSE	S					
-		E MORTGAGE			\$15,563	2.2%
	PHONE, UTIL				\$2,695	0.4%
	LEGAL & ACC				\$6,695	0.9%
	INSURANCE				\$7.725	1.1%
	OTHER FIXED	D EXPENSE			\$18,815	2.6%
TOTAL FIXED EX					\$51,492	7.2%
					, , , , , , , , , , , , , , , , , , ,	
DEBT SERVICE	(EXCLUDES AN	NY REAL ESTAT	E MORTGAGE WH	ICH IS INCLUDED IN FIXED EXPENSES)		
	INTEREST				\$18,544	2.6%
	PRINCIPAL				\$59,019	8.3%
TOTAL DEBT SE	RVICE				\$77,563	10.9%
SUMMARY	FOTIONIC				Ф740 20C	400.00/
EXPECTED COLI					\$712,386 \$334,267	100.0% 46.9%
	INGES					
DEBT SERVICE	INCOME & DE	DOENT OF D	FROOMAL BROD	HOTION	\$77,563	10.9%
			ERSONAL PROD	UCTION	\$300,556	54.8%
PURCHASER PR			NAL PRODUCTIO	N	\$548,538 \$66,726	77.0% 12.2%
TAX SAVINGS FROM DEPRECIATION & PERCENT OF PERSONAL PRODUCTION TOTAL ECONOMIC BENEFIT-CASH, TAX SAVINGS, EQUITY & % PERSONAL PROD.					\$22,486	4.1% 71.1%
TOTAL ECONOM	IIC BENEFII-C	ASH, IAX SA			\$389,768	
THE CACH ELON	A/ EVAMBLE I	C DACED ON		ST YEAR RETURN ON INVESTMENT	\$224,180	52.1%
I IIIO CASH FLO				ASSUMPTIONS:	£420.000	600/
	PRACTICE SALES PRICE & PERCENT OF GROSS			\$430,000	62%	
	WORKING CAPITAL TOTAL PRACTICE LOAN				\$35,000	
	TOTAL PRACTICE LOAN				\$465,000	
	PRACTICE LOAN TERMIN MONTHS				4.50%	
	PRACTICE LOAN TERM IN MONTHS				84	
	PRACTICE MONTHLY PAYMENT				\$6,464	11%
	BUILDING PRICE				\$164,000	
		NTHLY PAYN			\$1,297	2%
		L MONTHLY F			\$7,760	13%
	ESTIMATED I	MONTHLY HY	GIENE AND ASSO	OCIATE PROFIT	\$9,165	15%

Rutherfordton Area DATA SUMMARY FOR PRACTICE NUMBER 8717 The following data is provided by the owner of the practice. It is believed to the best of the owner's knowledge to be a true and accurate representation of the facts of the practice. It is the responsibility of any purchaser to erify all information contained herein and to seek qualified counsel in the interpretation and verification thereof. OFFICE DATA SQUARE FOOTAGE OF OFFICE 1,320 EXPANDABLE FOOTAGE CURRENT MONTHLY RENTAL i.e. "1200 PRICE PER SQUARE FOOT IS OFFICE HANDICAPPED ACCESSIBLE? Ramp in rear NUMBER OF PARKING SPACES 20 Office Lot PROXIMITY OF PARKING PLACES TOTAL NUMBER OF EQUIPPED OPERATORIES NUMBER OF PLUMBED BUT UNEQUIPPED OPERATORIES NUMBER OF OPERATORIES USED PRIMARILY BY DENTIST(S) NUMBER OF OPERATORIES USED PRIMARILY BY HYGIENIST(S) NUMBER OF UNPLUMBED AND EMPTY OPERATORIES DO YOU OWN YOUR BUILDING? DO YOU WISH TO SELL THE BUILDING? Yes WAS BUILDING APPRAISED? WHEN? APPRAISED PRICE \$164,000 IF NOT APPRAISED, ESTIMATED BUILDING PRICE IF NOT FOR SALE, MO. RENTAL AMOUNT \$2,000 ANNUAL REAL ESTATE TAXES ANNUAL REAL ESTATE INSURANCE COST DATE OF LEASE i.e. "1/1/99" DATE LEASE ENDS - i.e. "1/1/04" RENEWAL OPTIONS IS THERE AN OPTION TO PURCHASE? BUILDING VALUE TO BE USED \$164,000 PURCHASER MORTGAGE INTEREST RATE 5.00% PURCHASER MORTGAGE TERM - YEARS 15 PURCHASER MONTHLY PAYMENT \$1,297 PURCHASER CURRENT MONTHLY RENT PRICE PER SQUARE FOOT \$11.79 WORK SCHEDULE PLANS AFTER SALE OF PRACTICE Retire DAYS/WEEK CURRENTLY WORKED 3.5 HOW MANY DAYS WOULD YOU PREFER TO WORK FOR BUYER DESIRED WORK DAYS/WEEK 1ST YR DESIRED WORK DAYS/WEEK 2ND YR DESIRED WORK DAYS/WEEK 3RD YR DESIRED WORK DAYS/WEEK 4TH YR DESIRED WORK DAYS/WEEK 5TH YR DESIRED WORK DAYS/WEEK 6TH YR

PRACTICE DATA	
MANAGEMENT CONSULTANT IN LAST 5 YRS? IF SO WHO?	No
RESULTS	
DESCRIBE INTERNAL MARKETING	
DESCRIBE EXTERNAL MARKETING	
HAS GROSS CHANGED SIGNIFICANTLY? WHY?	
LIST SEDATIONS USED - NITROUS, DOCS, IV SEDATION	
IS YOUR PRACTICE MERCURY FREE - NO AMALGAM?	
WHAT TYPE RECALL SYSTEM	
WHAT TYPE COMPUTER SYSTEM	PracticeWorks
PURCHASER MUST PERSONALLY VERIFY PATIENT POPULATION DAT	A & REDUCED FEE PLANS
ESTIMATE NUMBER OF PTS LAST 18 MONTHS	1,947
AVERAGE NUMBER OF NEW PATIENTS PER MONTH	34
AVERAGE NUMBER PTS TREATED PER DAY BY DENTIST(S)	10
AVERAGE NUMBER PTS TREATED PER DAY BY HYGIENIST(S)	10
HOW FAR AHEAD IS DENTIST SCHEDULED?	
HOW FAR AHEAD IS HYGIENIST SCHEDULED?	
PRACTICE DATA	
% INCOME FROM CASH	24%
% OF PATIENTS PAYING CASH	24%
% INCOME FROM FEE FOR SERVICE INSURANCE	35%
% OF PATIENTS WITH FEE FOR SERVICE INSURANCE	35%
% PRACTICE INCOME FROM REDUCED FEE PLANS	
% OF PATIENTS WITH REDUCED FEE PLANS	
% PRACTICE INCOME FROM CAPTITATION	
% OF PATIENTS WITH CAPITATION	1404
% PRACTICE INCOME FROM MEDICAID % OF PATIENTS WITH MEDICAID	41%
% PRACTICE INCOME FROM REDUCED FEE PLANS	41%
% OF PATIENTS WITH REDUCED FEE PLANS	41%
SCHEDULING DATA	
MONDAY	8:30 AM - 12:30 PM/1:30 PM - 5:00 PM
TUESDAY	8:30 AM - 12:30 PM/1:30 PM - 5:00 PM
WEDNESDAY	8:30 AM - 12:30 PM/1:30 PM - 5:00 PM
THURSDAY	8:30 AM - 12:30 PM
FRIDAY	
SATURDAY	
SUNDAY	
OWNER HOURS WORKED PER WEEK	33
ASSOCIATE HOURS WORKED PER WEEK	
HYGIENIST HOURS WORKED PER WEEK	
DENTIST PATIENT VISITS PER YEAR	
HYGIENE PATIENT VISITS PER YEAR	
NUMBER OF DAYS WORKED PER YEAR	180
NUMBER OF WEEKS WORKED PER YEAR	47
COLLECTION DATA	
WHAT IS YOUR COLLECTION PERCENTAGE	
ACTUAL ACCOUNTS RECEIVABLE BALANCE	\$123,861
WHAT IS YOUR PATIENT CREDIT BALANCE	
ACCOUNTS RECEIVABLES - CURRENT	
ACCOUNTS RECEIVABLES - 31-60 DAYS	
ACCOUNTS RECEIVABLE - 61-90 DAYS	
ACCOUNTS RECEIVABLE >90 DAYS	

WHAT PERCENTAGE OF THE PRACTICE INCOME IS:	
HYGIENIST PRODUCTION	23%
OPERATIVE	40%
PEDODONTICS	
ORTHODONTICS	
IMPLANTS	
REMOVABLE PROSTHETICS	
FIXED PROSTHETICS ENDODONTICS	
PERIODONTICS	
ORAL SURGERY	3%
COSMETIC TMJ TREATMENT	
SOFT TISSUE MANAGEMENT	
DIAGNOSTIC	
TOTAL	100%
WHAT SERVICES ARE REFERRED OUT?	
REVENUES SOURCES	
IS ANY OF YOUR REPORTED INCOME FROM ANY OTHER	
SOURCE THAN PATIENT TREATMENT FROM THIS PRACTICE?	No
IF SO HOW MUCH IN CURRENT PERIOD?	
IF SO , HOW MUCH FOR LAST YEAR?	
IF SO HOW MUCH FOR THE PREVIOUS YEAR?	
WHAT IS THE SOURCE OF THIS OTHER INCOME?	
WHAT IS THE SOURCE OF THIS OTHER INCOME:	
EEE SCHEDUI E	
	\$91
FEE SCHEDULE ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331	\$91
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331	
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950	\$216
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750	\$216 \$869
	\$216
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330	\$216 \$869
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392	\$216 \$869 \$670
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740	\$216 \$869 \$670 \$158
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962	\$216 \$869 \$670 \$158 \$869
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320	\$216 \$869 \$670 \$158 \$869 \$889
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320	\$216 \$869 \$670 \$158 \$869 \$889 \$790
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569 80%
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569 80%
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES WITHIN	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569 80%
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES WITHIN	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569 80%
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES WITHIN	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569 80%
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES WITHIN MAJOR EMPLOYERS IN AREA	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569 80%
ADULT PROPHY 01110 TWO SURFACE ANTERIOR COMPOSITE 02331 CORE BUILD-UP 02950 CROWN - GOLD/PORCELAIN 02750 ANTERIOR CANAL ROOT CANAL 03310 PANORAMIC X-RAY 00330 TWO SURFACE POSTERIOR COMPOSITE 02392 CROWN - PORCELAIN CERAMIC 02740 LABIAL PORCELAIN VENEER 02962 BICUSPID ROOT CANAL 03320 AVERAGE OF FEES PERCENT OF FEE PARITY DEMOGRAPHIC DATA WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES WITHIN	\$216 \$869 \$670 \$158 \$869 \$889 \$790 \$569 80%

STAFF DATA						
POSITION	YEAR	STAY?	VALUE OF BENEFITS	ANI	NUAL SALARY AND/C	OR COMMISSION PERCENT
RECEPTIONIST				\$28,913		
OFFICE MANAGER						
INSURANCE						
OTHER FRONT DESK				\$26,829		
BOOKKEEPER						
ASSISTANT				\$22,474		
ASSISTANT						
ASSISTANT						
ASSISTANT						
ASSISTANT						
HYGIENIST				\$32,513		
HYGIENIST				\$18,999		
HYGIENIST						
HYGIENIST						
LAB TECHNICIAN						
LAB TECHNICIAN						
ASSOCIATE						
ASSOCIATE						
ASSOCIATE						
WHAT BENEFITS DO	YOU PRO	VIDE FOR 1	THE STAFF?			
				<u> </u>		
COST OF BENEFITS P	ROVIDED	FOR EACH	H EMPLOYEE			
				•		
DO YOU HIRE ANY UN	IPAID FAI	MILY MEMB	ERS?	No		
			AT IS THE ESTIMATED			
FAIR MARKET VALUE	OF THEIR	R JOB?				
ADE THERE ANY EMR	OVEES	WHO ARE I	DAID MODE OD LEGG	No		
ARE THERE ANY EMPLOYEES WHO ARE PAID MORE OR LESS THAN THE NORMAL SALARY FOR THEIR POSITION?			INO			
WHAT POSITIONS AND WHAT IS AMOUNT OF OVER/UNDER						
COMPENSATION FOR EACH			0. 0.12.00.132.0			
COLLECTION CENTER	RS					
PERIOD		1/1/2015 -	2014	2013		
GROSS COLLECTIONS			\$	\$	\$	
OWNER COLLECTIONS			\$	\$	\$	
HYGIENIST COLLECTIONS			\$	\$	\$	
ASSOCIATE COLLECTIONS			\$	\$	\$	
ASSOCIATE COLLECTIONS			\$	\$	\$	
ASSOCIATE COLLECTIONS			\$	\$	\$	
ASSOCIATE COLLECTIONS ASSOCIATE COLLECTIONS						
ASSOCIATE COLLECTIONS ASSOCIATE SALARY IN DOLLARS OR COMMISSION PERCENT \$ OR %						
HYGIENIST SALARY IN DOLLARS OR COMMISSION PERCENT			\$ OR %			
THOLENOT OALART II	, DOLLAR	VO OIV OOM	MISSION I ENGLIST	Ψ	/0	

CONFORMITY DATA	
	lv
DOES YOUR PRACTICE MEET OSHA STANDARDS? WHY NOT?	Yes
DOES YOUR PRACTICE MEET HIPAA STANDARDS? WHY NOT?	Yes
ANY DISCIPLINARY ACTION IN LAST 7 YRS? EXPLAIN	No
ANT DISCH ENAKT ACTION IN EAST / TIKS: EXTERNIN	INO
ANY PRACTICE LAWSUITS FILED IN PAST TEN YRS. EXPLAIN	No
DESCRIBE ANY HEALTH PROBLEMS WHICH WOULD AFFECT	None
YOUR PRACTICE OF DENTISTRY	
INSURANCE EXPLANATION	
TOTAL EXPENSE FOR INSURANCE IN CURRENT PERIOD	
HOW MUCH OF TOTAL IS FOR OWNER HEALTH INSURANCE?	
HOW MUCH OF TOTAL IS FOR STAFF HEALTH INSURANCE?	
HOW MUCH OF TOTAL IS FOR OTHER OWNER BENEFITS?	
HOW MUCH OF TOTAL IS FOR MALPRACTICE INSURANCE?	
HOW MUCH FOR TOTAL IS FOR BUILDING INSURANCE?	
TAXES AND LICENSES EXPLANATION	
TOTAL EXPENSE FOR TAXES	
HOW MUCH OF TOTAL IS FOR PAYROLL TAXES?	
HOW MUCH OF TOTAL IS FOR STAFF PAYROLL TAX?	
HOW MUCH OF TOTAL IS FOR OWNER PAYROLL TAX?	
HOW MUCH OF TOTAL IS AD VALOREM (PRACTICE EQUIP)?	
HOW MUCH OF TOTAL IS FOR REAL ESTATE TAXES?	
PENSION EXPLANATION	
TOTAL EXPENSES FOR PENSION PLAN	
HOW MUCH OF TOTAL IS FOR STAFF	
HOW MUCH OF TOTAL IS FOR OWNER?	
BENEFITS EXPLANATION	
TOTAL EXPENSE FOR EMPLOYEE BENEFITS	
HOW MUCH OF TOTAL IS FOR STAFF?	
HOW MUCH OF TOTAL IS FOR OWNER?	
REDUCED FEE PLANS NAME OF PLAN	PAYS WHAT PERCENT OF YOUR STANDARD FEE
NAME OF PLAN	PATS WHAT PERCENT OF TOUR STANDARD FEE

DESCRIBE YOUR PRACTICE, STAFF, PATIENTS, COMMUNITY, AND PRACTICE PHILOSOPHY AND THE BEST STRENGTHS AND WORST WEAKNESSES OF YOUR PRACTICE: