

Griffith Cosmetic and Family Dentistry
6360 Pine Ridge Road Suite 202
Naples, Florida 34104
(239)354-5353

Financial Policy

To avoid any misunderstanding regarding this policy, it is necessary for you to read and sign this financial policy before treatment.

1. **Payment at time of service:** It is our policy that payment is due at the time of service. We accept cash, checks, and credit cards for payment. We also accept Dental Fee Plan and CareCredit. Please ask at the front desk for information regarding these payment plans.
2. **Insurance:** We *do not* accept dental insurance as payment, but if you have dental insurance we will be happy to complete a dental claim for you to expedite your being reimbursed. Please present your dental insurance card to the front desk before treatment.
3. **Collections:** Please note that any unpaid balance will be subject to referral to a collection department. Any bounced checks not reconciled will be sent to the State Attorneys Office.

I have read the Financial Policy and I agree to this policy.

Patient Name **(Please Print)**

Patient/Authorized Signature

Date