

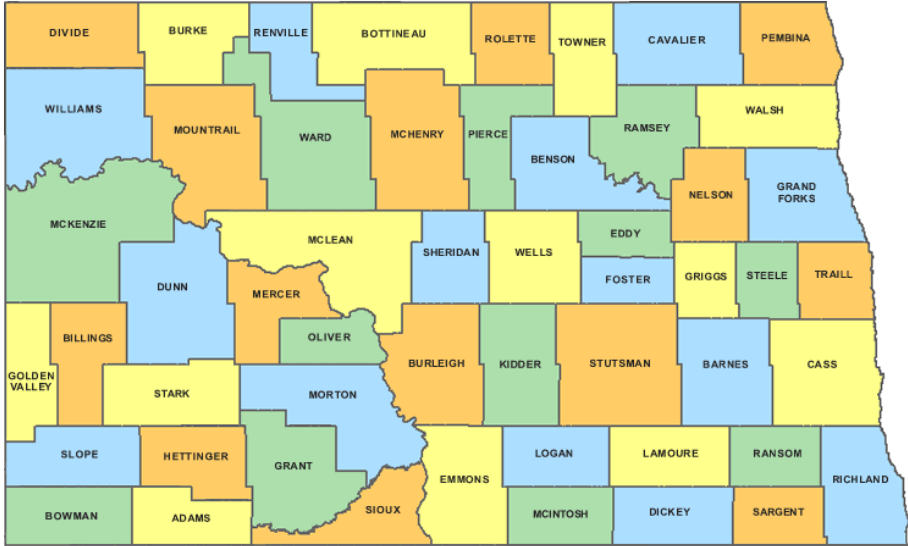
PROVIDER NAME: _____

ADDRESS: _____

LOCATION NPI#: _____

IF MULTIPLE LOCATIONS,
PLEASE COPY THIS PAGE
AND SUBMIT ONE PER
LOCATION.

PLEASE INDICATE THE
COUNTIES IN WHICH EACH
FACILITY CAN AND DOES
PROVIDE SAME DAY
SERVICES.



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GEOGRAPHICAL AREAS OF COVERAGE IN NORTH DAKOTA				
<input type="checkbox"/> Adams	<input type="checkbox"/> Divide	<input type="checkbox"/> LaMoure	<input type="checkbox"/> Pembina	<input type="checkbox"/> Stark
<input type="checkbox"/> Barnes	<input type="checkbox"/> Dunn	<input type="checkbox"/> Logan	<input type="checkbox"/> Pierce	<input type="checkbox"/> Steele
<input type="checkbox"/> Benson	<input type="checkbox"/> Eddy	<input type="checkbox"/> McHenry	<input type="checkbox"/> Ramsey	<input type="checkbox"/> Stutsman
<input type="checkbox"/> Billings	<input type="checkbox"/> Emmons	<input type="checkbox"/> McIntosh	<input type="checkbox"/> Ransom	<input type="checkbox"/> Towner
<input type="checkbox"/> Bottineau	<input type="checkbox"/> Foster	<input type="checkbox"/> McKenzie	<input type="checkbox"/> Renville	<input type="checkbox"/> Traill
<input type="checkbox"/> Bowman	<input type="checkbox"/> Golden Valley	<input type="checkbox"/> McLean	<input type="checkbox"/> Richland	<input type="checkbox"/> Walsh
<input type="checkbox"/> Burke	<input type="checkbox"/> Grand Forks	<input type="checkbox"/> Mercer	<input type="checkbox"/> Rolette	<input type="checkbox"/> Ward
<input type="checkbox"/> Burleigh	<input type="checkbox"/> Grant	<input type="checkbox"/> Morton	<input type="checkbox"/> Sargent	<input type="checkbox"/> Wells
<input type="checkbox"/> Cass	<input type="checkbox"/> Griggs	<input type="checkbox"/> Mountrail	<input type="checkbox"/> Sheridan	<input type="checkbox"/> Williams
<input type="checkbox"/> Cavalier	<input type="checkbox"/> Hettinger	<input type="checkbox"/> Nelson	<input type="checkbox"/> Sioux	
<input type="checkbox"/> Dickey	<input type="checkbox"/> Kidder	<input type="checkbox"/> Oliver	<input type="checkbox"/> Slope	

PLEASE INDICATE ANY LIMITATIONS SPECIFIC TO THE GEOGRAPHICAL AREA IN WHICH YOU PROVIDE SERVICES:
