

**David B. Franklin, Ph.D., LCSW**

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San Antonio, Texas 78258

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*Short-Term Therapy...Long-Term Results*

**Patient Information**

First Name: [redacted] MI: [redacted] Last Name: [redacted] *Home or work telephone number required*  
Address: [redacted] Home Phone: [redacted]  OK to leave message?  
Work Phone: [redacted]  OK to leave message?  
City: [redacted] State: [redacted] Zip Code: [redacted] Cell Phone: [redacted]  OK to leave message?  
E-Mail: [redacted]  OK to contact?  
Date of Birth (mm/dd/yy): [redacted] SSN: [redacted] Driver's License Number: [redacted]  
Employer: [redacted]

Gender:  Male  Female Marital status:  Married  Single  Divorced  Widowed  
 Living Together  Domestic Partner

Ethnicity:  African American  Arab American  Asian American  Caucasian  Hispanic American  
 Native American  Resident Alien  Other

Employment:  Full time  Part time  Retired  Student  Unemployed

**Insured's Information**

First Name: [redacted] MI: [redacted] Last Name: [redacted] *Home or work telephone number required*  
Address: [redacted] Home Phone: [redacted]  OK to leave message?  
Work Phone: [redacted]  OK to leave message?  
City: [redacted] State: [redacted] Zip Code: [redacted] Cell Phone: [redacted]  OK to leave message?  
E-Mail: [redacted]  OK to contact?  
Date of Birth (mm/dd/yy): [redacted] SSN: [redacted] Driver's License Number: [redacted]  
Employer: [redacted]

Insurance Plan Name: [redacted]

Insured's ID # [redacted] Group Policy # [redacted]

**Secondary Insurance, if applicable**

First Name: [redacted] MI: [redacted] Last Name: [redacted] *Home or work telephone number required*  
Address: [redacted] Home Phone: [redacted]  OK to leave message?  
Work Phone: [redacted]  OK to leave message?  
City: [redacted] State: [redacted] Zip Code: [redacted] Cell Phone: [redacted]  OK to leave message?  
E-Mail: [redacted]  OK to contact?  
Date of Birth (mm/dd/yy): [redacted] SSN: [redacted] Driver's License Number: [redacted]  
Employer: [redacted]

Insurance Plan Name: [redacted]

Insured's ID # [redacted] Group Policy # [redacted]