

ARS CPT/RVU Volunteer Information

If you wish to volunteer for the ARS CPT/RVU survey, please complete this form and fax form to Frederick A. Kuhn, M.D. at (912) 355-9773.

Name: _____

Address: _____

City: _____ State: _____

Telephone: () - Fax: () -

E-mail address: _____

Type of Practice

- Private (Solo)
- Private (Single Specialty Group)
- Private (Multi Specialty Group)
- Private (Large Institution, Multi Specialty)
- University Department
- University Division
- Government