



NOTICE

Medical Related Forms

Please note that effective March 1, 2011 there will be a \$25.00 fee to complete all forms and/or to copy your medical records. This includes all insurance forms and medical leave forms. We ask that this fee be paid at the time of the request. Forms that are faxed to us will not be completed until fee is paid.

In order to comply with your requests in a professional and efficient manner, we ask that you allow 2-3 working days for the forms to be completed. If you are going to pick the forms back up at our office, please call to ensure forms are ready.

If you like for the forms to be mailed to you or forwarded elsewhere, please supply us with a self-addressed envelope with the current address.

We appreciate your consideration and patience along with the ability to better serve you.

Patient Signature

Date