

I would prefer to:

- pick-up the requested information at a mutually agreeable time and place;
- have a copy of the Requested Information mailed to me at the following address:

Signature of Patient (or Personal Representative)

Date

Printed name of Personal Representative

Relationship to Patient

- CD copy for free
- \$1.00 per page
- After 25 pages, \$0.25 per page

After you have completed this form please return it to our office. You may also fax it directly to our office.

AVENTURA	BOYNTON BEACH	JUPITER
21110 Biscayne Boulevard, Ste 203 Miami, FL 33180 Phone: (305) 948-9595 Fax: (305) 948-9292	1485 Gateway Blvd, Ste 102 Boynton Beach, FL 33426 Ph: (561) 572-3227 Fax: (561) 572-3228	3889 Military Trail, Ste 101 Jupiter, FL 33458 Phone: (561) 932-0995 Fax: (561) 932-0997
PALM BEACH GARDENS	PORT ST. LUCIE EAST	PORT ST. LUCIE WEST
9089 N. Military Trail, Ste 37 Palm Bch Gardens, FL 33410 Phone: (561) 340-3595 Fax: (561) 340-3594	9109 S US 1 Hwy, Ste 101 Port St Lucie, FL 34952 Phone: (772) 398-1305 Fax: (772) 398-1307	672 SW Prima Vista Blvd, Ste 101 Port St. Lucie, FL 34983 Phone: (772) 905-2555 Fax: (772) 336-8153
WELLINGTON - DR. AVNI	WEST PALM BEACH	RIVIERA BEACH
1395 State Rd 7, Ste 420 Wellington, FL 33414 Phone: (561) 204-4687 Fax: (561) 204-4694	944 S. Military Trail Suite-B West Palm Beach, FL 33415 Phone: (561) 781-8080 Fax: (561) 781-8088	3514 Broadway Suite-B Riviera Beach, FL 33404 Phone: (561) 781-8060 Fax: (561) 781-8066
KISSIMMEE	PBG-NORTHLAKE	MARGATE
819 North Central Ave Kissimee, FL 34741 Phone: (407) 288-8242 Fax: (407) 490-1309	4074 Northlake Blvd. Palm Beach Gardens, FL 33410	6101 Atlantic Blvd. Margate, FL 33063