

EUT-2

MEDICAL/DENTAL APPOINTMENT

(THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974. USE BLANKET PAS - DD FORM 2005.)

INSTRUCTIONS

- 1. Please meet the appointment(s) made for you promptly.
- 2. Bring this slip with you and give it to the appointment clerk.
- 3. If you are unable to keep this appointment, cancel it at least 24 hours in advance.

403686

I. IDENTIFICATION DATA

TYPED NAME OF PATIENT (Last - First - Middle Initial)		GRADE
A I I		F-6
ORGANIZATION OR HOME ADDRESS (Include Zip Code)	SSAN	DUTY PHONE
Army		

II. APPOINTMENT DATA

HOUR	DATE	CLINIC	DOCTOR	TELEPHONE NUMBER	DATE ISSUED	VERIFIED
0745	27 Feb 79	Perio	S. Olson	6397	23 Feb 79	Stat.
1300	27 Feb 79					
0730	1 Mar					
0950	2 Mar 79	Open (3)	Cohen	"	"	"

REMARKS

[Handwritten signature]

PRIVACY ACT MATERIAL REMOVED