

DISABILITY / FMLA

All Disability or FMLA packets require a pre-payment of \$25 per packet, payable at the time of drop off, unless a Culinary employee. Forms will not be processed without payment. Insurance companies do not cover this fee.

Once payment is received, please allow 7-10 business days for processing.

Please do not discuss your documentation request with your provider. We have assigned staff to assist you.

Patient Signature

DOB

Date

_____ I will pick up the completed forms upon receiving a phone call. The best number to reach me is:

(____) _____

_____ Please fax the completed forms to:

(____) _____

Patient Account #: _____

Payment received: ___ Cash ___ Check ___ CC ___

Date: _____

FMLA ___ Disability ___ Extension ___

Patient ___ Spouse ___

Accepted by initials _____