

AUBURN UNIVERSITY MONTGOMERY

STUDENT HEALTH SERVICES

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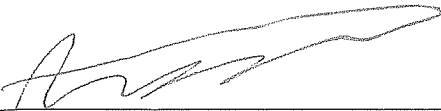
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This is to verify that a copy of the following records and/or lab results were given to

Ali Albrahim on 08-30-17
Print Patient's Name Date

Description of record(s) copied: Labs



Patient's Signature

8/30/17
Date