NENA FLOR CAMBARE-PIGA, M. D.
NAOMI C. PIGA, M.D.
3105 West 15th Street, Suite D
Plano, TX 75075
Tel. No. (972) 867-2869
Fax No. (972) 867-8399

REQUEST FOR RELEASE OF MEDICAL RECORDS

PATIENT'S NAME/S: ____

DATE/s OF BIRTH : ____

I/ We hereby authorize Dr. Nena Flor Cambare-Piga to release a copy of medical records of the above named patient(s) to:

T O: ____
(Name of Physician)

____
Address (Street & City)

____________________ ______________ ______________
(State & Zip Code) Tel. No. Fax No.

Requested by:

__________________________________ ______________
Parent's/Guardian's Signature Date