



200607187545

**SIUC School of Medicine  
Family Practice  
Medical Records**

**Last Name**

**First Name**

**DOB**



BREAK

For optimum accuracy, please print in capital letters and avoid contact with the edge of the box. The following will serve as an example:

A	B	C	D	E	F	G	H	I	J	K	L	M
N	O	P	Q	R	S	T	U	V	W	X	Y	Z