

Date

Mr. Edward Lara, HR Director
American Home Health Corp.
1660 N. Farnsworth Ave., Ste. 3
Aurora, IL 60505

Dear Mr. Lara:

I received the series of three Hepatitis B vaccinations at _____
_____ in _____ (year).

I have contacted _____ to request a copy of
my Hepatitis B record. I was told that _____
_____. Therefore, I

am unable to get a copy of my Hepatitis B record.

Sincerely,

(Signature)