Customer name			
Name	Second name		Last name
my full name	my full name		my full name
			,
m 1 1		C 1	
Telephone		Gender:	
(123) 456-7890		male	
Client's date of birth			
2022-01-10			
Additional customer inform	nation		
Auditional customer inform	nauon		
Passport#:			
(123) 456-7890			
Have you had any of the fol	llowing sympton	ms in the past	14 days?
	-		
Fever:			
Ογes			
©No			
Cough (new onset or worsening of	chronic		
cough) *			
Oyes			
©No			
Throat pain			
CYes			
•No			
Difficulty breathing (dyspnea)			
Oyes			
<b>©</b> N <sub>0</sub>			
Naugas *			
Nausea *			
Oyes			
<b>●</b> N <sub>0</sub>			

Abdominal pain *
$\circ_{\!$
Chills *
$\circ_{\mathrm{Yes}}$
$ \mathbf{Q}_{N_0} $
Headache
CYes
Muscle aches (myalgia)
Oyes
$ullet_{ m No}$
Fatigue *
$\circ_{Yes}$
Runny nose (rhinorrhea) *
OYes .
$ \mathbf{e}_{N_0} $
Vomiting
Ογes
$ ightharpoonup_{0}$
Diarrhea (3 loose stools / day) *
Yes
Loss of smell *
CYes
$ ightharpoons_0$
Loss of taste
Ϋ́es
$ ightharpoonup_{0}$

Other Specify	
Other Specify	
(123) 456-7890	
Data of anget of the first symptoms	
Date of onset of the first symptoms (123) 456-7890	
(123) 430-7690	
Lab test	
Lab test	
Test type: nasal swab (PCR) / antigo	en / SARS-COV-2
<b>V1</b>	
Select the test	
0	
OANTÍGENO OTT DOD	
RT-PCR PCR-24hrs	
PCR-24hrs	
PCR	
4 CR	
<b>Customer Address</b>	
Address	Address2
full street address	street address line number two
m.	
Town	Zip Code
full street address	zip code or postal code
State / Province	Country
Alabama	Afghanistan
Madana	Aighanstan
Signature	
Signature	
Email address	
rehmanahmad101@gmail.com	
<u> </u>	
Electronic signature accept	anca
Electronic signature accept	шисс

By checking ts box, you agree that your electronic signature will be used in place of your handwritten signature. If this is not what you want, you have the right to ask to sign a paper copy instead. By checking this box, you warve this right Upon acceptance, you may request in writing that we send you a paper copy of the electronic record. You will not have to pay anything for such a copy, and you do not need any special software or hardware to view it. Your acceptance of electronic signature for any document will remain in

effect until such time as you notify us in veriting that you no longer wish to use electronic signature. The revocation of your acceptance will not entall any penalty for you Your acceptance of electronic signature for any document will remain in effect until such time as you notify us in veriting that you no longer wish to use electronic signature. The revocation of your acceptance will not entall any penalty for you Your acceptance of electronic signature for any document will remain in effect until such time as you notify us in veriting that you no longer wish to use electronic signature. The revocation of your acceptance will not entall any penalty for you