



Healthcare Provider Labs

Patient's Test Results Sign Off

Derived on privacy pursuant to the Federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA").

I, 34 42 certify that I am indeed the person coinciding with the COVID-19 test and corresponding results to follow.

I am satisfied with the testing procedure given by Health Care Providers Laboratory.

Located at: Hollywood/Vine

Phone Number: +15646533333



3:32:41 PM Thu Mar 11 2021