## **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, arbtouseef@gmail.comarbtouseef@gmail.com, 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: +12312312312



7:48:38 AM Fri Apr 02 2021