

## **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, tmetme, 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: test

Phone Number: 4411414



11:49:13 AM Thu Apr 15 2021