

Page 4

A. Name and Location	B. Date(s) of Records
<p>XX XX XX XX XX XX XX XX</p>	<p>2020-07-19, 2018-03-06 to 2019-02-12</p>
<p>XX XX XX XX XX XX XX XX</p>	<p>2018-03-06, 2018-01-15</p>
Veteran indicated they will send evidence documents to VA.	

Signature of veteran, claimant, or representative:

WWWWW b
WWWWW
- Signed by digital authentication to api.va.gov