

WELCOME TO OUR OFFICE!

Dear Patient,

I would like to take this opportunity to welcome you to our office. My staff and I are dedicated to providing you and your family with comprehensive quality medical care. To better help us serve you, we appreciate if you could take the time to fill out and sign the following forms prior to your visit and bring them with you to that visit. All information provided by you will be held strictly confidential and released only with your written permission.

**Patient Information Sheet
Health History Survey
Office Credit Policy
Release and Assignment Form**

Please also bring with you:

**Your Current insurance Card.
Photo ID
All medications you are currently taking, both prescription medications and
over the counter medications. (Please bring the actual prescription bottle)**

Thank you for providing us with this important information. My office staff and I are available to answer any questions you may have.

We look forward to seeing you.

Sincerely,
Russell W. Faria, D.O.

**Address: 721 M Street NE, Suite 100, Auburn, WA 98002
Phone: 253-735-0260**