



AC?

Three empty boxes for area code.

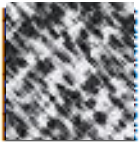
5. a. Have you gone to a doctor or clinic for treatment (including evaluations, checkups, counseling, prescriptions, or medicine) since JUNE, 2022?

YES

NO

Empty box for YES response.

Empty box for NO response.



b. If you answered "YES" to 5.a., please list:

		Reason For Visit:												Month		Year	
Most Recent Visit	1.																
	2.																
	3.																

6. a. Have you been hospitalized or had surgery since JUNE, 2022?

YES

NO

Empty box for YES response.

Empty box for NO response.



b. If you answered "YES" to 6.a., please list:

		Reason For Hospitalization or Surgery:												Month		Year	
Most Recent	1.																
	2.																
	3.																

REMARKS: If you use this space to further answer questions 1. through 6., place an "X" in the box to the right and print on the lines below.

Empty box for remarks.

Multiple horizontal lines for printing remarks.

DATE REPORT COMPLETED (MM/DD/YYYY)

TELEPHONE NUMBER (include Area Code)

TOE 790

20181

P9

