Your return appointment should be scheduled with:

WILLIAM BEARD, LMSW

Your follow-up appointment should be scheduled in:

\bigcirc	1 wk	\bigcirc	2 wks
\bigcirc	3 wks	\bigcirc	4 wks

Your next appointment is on:

date	

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_____ pm

am

NcLaren

BAY PSYCHIATRIC ASSOCIATES

690 South Trumbull Bay City, Michigan 48708 tel (989) 922 4900

Co-pays and deductibles are due at the time of service. $$_{\mbox{\scriptsize M-13094\,(11.14)}}$$

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