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Business Card - Name: RUSSELL J. STRUBLE, M.D.
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RUSSELL J. STRUBLE, M.D.
McLaren Bay Region Family Medicine

tel (989) 686-2535
fax (989) 686-2539

615 S. Euclid
Bay City, Michigan 48706

mclaren.org

YOUR NEXT APPOINTMENT IS ON:

MON TUE WED THUR FRI
 SAT SUN

date _____

at _____ am pm

If you are unable to keep your appointment, please give 24 hours notice.