



BEACH EYE CARE

www.beacheyecare.com

1201 First Colonial Road, Virginia Beach, VA 23454
4388 Holland Road, Suite 140, Virginia Beach, VA. 23452
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Note: This is a Records Request to request records from a practice other than Beach Eye Care

PLEASE **MAIL** COLORED IMAGES TO THE ADDRESS BELOW!!!! Will **NOT** accept images via fax as they are not legible!

DATE: _____

I hereby authorize you to release my medical records to:

Beach Eye Care
Attn: Medical Records
1201 First Colonial Road
Virginia Beach, VA 23454
Fax: (757) 412-2606

FROM: _____
(Doctor's Name, Name of Practice, City & State)

Fax: _____
(Phone number of Practice if fax number isn't available)

Patient's Signature: _____

Patient's Name (Print): _____

Patient's Date of Birth: _____