TRANSPORTATION REQUEST FOR OFF-CAMPUS MEDICAL APPOINTMENT

PLE SE COMPLE E HE ORM BELOW OREQ ES R NSPOR ION O HE L HC REPRO IDER WI HIN HESPRING IELD O YLIMI S ONCE HEMO OR POOLO ICEH SYO ROOMPLE ED REQ ES YO WILL RECEI E NEM ILCON IRM ION H YO RRIDEH SBEEN SCHED LED RIDES WILL DEP R ROM HEMO OR POOLO ICEONLY YO RREQ ES ORM M S BERECEI ED LE S B SINESSD YPRIOR O YO R SCHED LED PPOIN MEN <u>PLEASE ARRIVE AT THE MOTOR</u> <u>POOL OFFICE 30 MINUTES BEFORE YOUR SCHED ULED MEDICAL APPOINTMENT.</u> DRI ERSWILL NO W I D RING HE PPOIN MEN I YO H ENO REQ ES ED PICK P IMEON HIS ORM YO