

LIBERTY SHARONVILLE PEDIATRICS, INC.
RECORDS RELEASE

I hereby authorize: 11258 Lebanon Road
 Cincinnati, Ohio 45241
 (513) 563-0044

Steven R. Brinn, M.D.
 Lauren A. Peck, M.D.
 Otilia P. Fernandez, M.D.

7097 Liberty Center Drive
 West Chester, Ohio 45069

To Release To: Facility: _____

To Obtain From: Street Address: _____

 City and State: _____ Zip _____

I understand that my records may contain information regarding the diagnosis or treatment of HIV, (AIDS virus). other sexually transmitted diseases, drug and/or alcohol abuse, mental illness or psychiatric treatment. I give my specific authorization for these records to be released.

Child's Full Name: _____ Birthdate _____

_____ Birthdate _____

_____ Birthdate _____

_____ Birthdate _____

_____ Birthdate _____

Date: _____

ACCOUNT NUMBER: _____

Reason for leaving: _____

Signature _____

Parent/Guardian