

ALLEN EYECARE CENTER

DR. JEFFERY WOOD

DR. WILLIAM KRITZER, JR.

THERAPEUTIC OPTOMETRISTS

321 N. ALLEN DR. • ALLEN, TEXAS 75013



**AUTHORIZATION FOR RELEASE OF IDENTIFYING
HEALTH INFORMATION**

I hereby request that a copy of my medical records be released to
me.

Patient Name: _____

Patient Signature: _____

Date of Birth: _____

Date: _____