

WHITMIRE MEDICAL, INC.

Managing today's health...
with tomorrow's technology

Health Promotion Screening Event Request

** Information required*

*Name of Company _____

*Point of Contact _____

*Phone _____ Fax _____

*E-mail _____

*Location of Event _____

Street Address _____

*City _____ *State _____ *ZIP _____

Date(s) of Events _____

Tests to be Conducted _____

Notes _____

Mail to: Whitmire Medical
1112 S. 344th St.
Suite 303
Federal Way, WA 98003

Or Fax: (253) 874-4845