

Date: _____
(via FAX)

To Whom It May Concern, NBH:
(FAX Number) 1-877-389-1009

I request a copy of **ALL** records, documentation, and note screens pertaining to myself over the past two years.

Please mail this requested information to my home at:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____

Social Security Number: _____

Thanks for your help concerning this matter.

Sincerely,

Signature _____