

Fort William Family Health Organization

201-1260 Golf Links Rd, Thunder Bay, Ontario, P7B 0A1

Tel: 807-626-1234

Fax: 807-623-8832

Date: 2023-03-02

This letter is to certify that **Tara-lynn Thompson**

- was seen in my office today for medical problems
- was found to be unfit to work due to medical problem(s)
- is unfit for gym or sports due to medical problems
- is absent due to illness in the family
- may return to work
- may return to suitable work with the following restrictions:
- was found to be unfit for school due to medical reasons :

From To (dd-mm-yyyy)

Additional comments:

Sincerely,



Dr. Justine Tempelman

Fort William Family Health Organization
 201-1260 Golf Links Rd
 Thunder Bay , Ontario
 P7B 0A1
 Tel.: 807-626-1234

Invoice - 462154
 Print Date:2023-03-02 14:26

Bill To

TARA-LYNN THOMPSON
 8061 John Street Road
 THUNDER BAY, ON
 P7G 1L2
 Tel: 807-621-8042

Remit To

Fort William Family Health Organization
 201-1260 Golf Links Rd
 Thunder Bay, Ontario
 P7B 0A1
 Tel: 807-626-1234
 Fax: 807-623-8832

Patient: THOMPSON,TARA-LYNN
 Insurance No: 5365316610

(56403) Female DOB: 19761011

VISA BY PHONE MAR 2/23

Service Date 2023-03-02	Practitioner Tempelman, Justine	Payee Justine Tempelman	Ref. Doctor
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Item #:	Description	Service Code	Qty	Dx	Individual Total	Total HST	Total
661772	OFF WORK NOTE	_PR304A	1		22.75	0.00	22.75

Total:	22.75
Payments:	22.75
Discounts:	0.00
Overpayment:	0.00
Refund / Write off:	0.00
Balance:	0.00
(VISA)	

FORT WILLIAM FAMILY HE
 1260 GOLF LINKS RD P7B0A1
 THUNDER BAY ON
 20628156
 TD2062815601

SALE
 PHONE ORDER

Batch #: 393 RRN: 0013930050
 03/02/23 14:28:46
 CVD: Y
 Invoice #: 5 REF#: 00000005
 APPR CODE: 05399J
 VISA Manual CNP
 *****7404 **/**

AMOUNT \$22.75

001 APPROVED

Retain this copy for your records

CUSTOMER COPY