



1059 BY-PASS 123 · SENECA, SC 29678 · (864) 885-0551 · (864)885-1822

TO: _____

Patient Name: _____

Patient DOB: _____

Request For Release Of:

___ X-Ray Reports for _____

___ X-Ray (Films) on _____

___ Mammogram Films

___ Ultrasound Films

I hereby request that the above indicated records be released to:

Mountainview Medical Imaging
 1059 By-Pass 123
 Seneca SC 29678

 Patients Signature/Date