MILLENNIUM CHIROPRACTIC

7177 Brockton Avenue, Suite 219 Riverside, CA 92506

TEL: 951 - 323-7783

REFERRING LAW FIRM:

EMAIL: U+18148984@PDFFILLER.COM

ONLINE ATTORNEY REFERRAL FORM

ATTORNEY NAME:
CONTACT NAME:
ADDRESS:
TEL:
FAX:
EMAIL:
CLIENT/PATIENT NAME:
CLIENT TEL:
DATE OF ACCIDENT:
COMMENTS:
Thank you for referring your client(s) to our office. We assure you, our primary goal is for your client, our patient to feel better and recover quickly. We will contact your client immediately in order to set up an appointment for their initial exam, and then, notify you with the date of their

Please forward all documents to the above secure email address.

final claim will be forwarded to your office.

Please do not hesitate to contact our office with any questions you may have. Again, thank you for trusting us with your client's health.

first Chiropractic appointment. As soon as our patient signs their lien, we will forward the lien to your office to be signed by the attorney. We will be referring him or her to specialist(s) for further evaluations as needed. Once the patient treatment is finalized, a narrative report along with the

Millennium Chiropractic Dr. Meral Elgendy, D.C.