



125 Alexandra Park Rd
Wood Green
N22 7UN
Tel 0208 888 2518
Fax 0208 888 3815
E mail address:- alexandrasurgery@nhs.net

Dear Patient of Alexandra Surgery

If you would like your general practitioner to write a letter/certificate/form on your behalf then we need the following information:

Full name :

Date of Birth :

Address and Postcode :

Send the letter/certificate/form to whom: please state below

Name :

Address and Postcode :

Please state in your letter the following or if you wish to fill out this form and sign at the bottom you can do so and hand it into reception.

I am happy for my medical information to be disclosed to the above stated person/ company/ governing body.

Please state the **reason why** you would like this letter/certificate/form in a few lines below

Signature :

Charge £ _____

It can take up to **3 weeks** for this letter to be written and you can pick up the letter at Alexandra surgery reception once it is done. There is a charge for this letter of which can be paid in **cash or by cheque** when you come to the surgery to pick up the document. Please ask reception for the up to date charges for the relevant letter/certificate/form

Invoice for document. To be given to patient when request is made

The charge for this document is £ _____
Please pay at reception.