

Offer of Medical Care

I hereby acknowledge that Dr. \_\_\_\_\_ as advised me that the Atomic Energy Commission has offered to me at government expense a program of regular medical surveillance and care. I understand that the above program incurs no obligation whatsoever on my part including further research studies. I have decided to accept ~~reject~~ this offer.

Date 12/30/74 Patient's Signature \_\_\_\_\_

Witnessed by: Christine Witek

RECEIVED CHR

JUN 27 1977

RECORDS ROOM