



## CONFIRMATION FORM

Please CONFIRM that: Louella Virginia Peters  
Date Of Birth: March 14, 1952  
Band Status Number: 7050044301  
Location of appointment: Lillooet  
Date: June 18/26 Time: 5pm

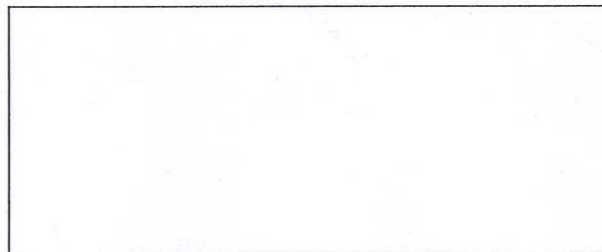
**Reason for Appointment:**

Consultation     Diagnostic tests     Treatment/Surgery     Follow-up  
Was an escort required?     YES     NO

Reason for Escort:

- Has a physical/mental disability such that he/she cannot travel without help
- Is medically incapacitated/has been declared "mentally incompetent" by a court
- Is a minor and needs to be accompanied/requires legal consent by a parent or guardian
- Needs translation, if translation services are not available at the health facility
- Requires instruction on necessary medical procedures that cannot be given to the client only
- Other (must be a medical or legal reason):

Physician's Professional Stamp Here:



Authorized Signature: \_\_\_\_\_

Pending appointment(s) if known: \_\_\_\_\_

By confirming attendance, this client can continue to receive financial assistance through our medical assistance program.



Lytton First Nation Ti'Kemtsin  
Community Health Centre  
PO Box 20, Silo Road, Lytton, BC V0K 1Z0  
250.256.8129  
patienttravel@lfn.band

Thank you!