**INFORMATION FOR OBTAINING YOUR CLINICAL RECORDS**

Release of clinical records may be requested by filling out an **Authorization to Release Information Form.** Please include your name, date of birth, phone number, reason for your request and specify the type of records that you are requesting. It is important that the authorized individual initial all the appropriate sections on the form.

In addition, complete the **Release of Information Questionnaire.**

The **Authorization to Release of Information** form and is available for completion online at **davidlawrencecenter.org** or you may complete a release at any Center location.

The entire release of information form must be completed, signed, dated and witnessed. Please do not forget to include the questionnaire. Completed forms may be faxed, mailed or dropped off.

Location: David Lawrence Center

Attention: Clinical Records Department

Address: 2806 South Horseshoe Drive

Phone: 239-354-1403 Fax: 239-354-1458

Record pick up times are Monday through Thursday 8:00 AM to 4:00 PM, Friday 8:00 AM to 1:00 PM.

The cost of producing records is $1.00 per page. The cost for approved form completion is $15.00. Payment is required prior to the release of records. Payment can be made by cash or credit card (Debit, Visa or Mastercard). We are unable to accept American Express. Please do not send cash if you are mailing your payment.

**14-30 business days** is required to process all records requests. Clinical Records will notify the appropriate individual when records are ready for pick up.