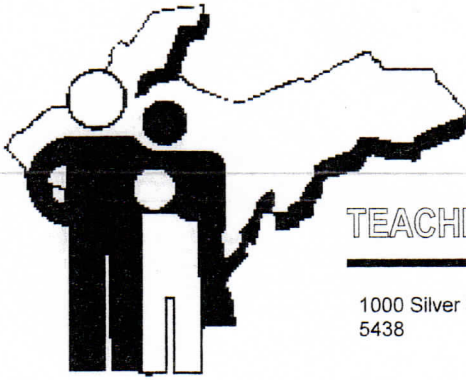


2013



TEACHING FAMILY HOMES OF UPPER MICHIGAN

1000 Silver Creek Road • Marquette, MI 49855 • 906-249-KIDS (5437) • Fax: 906-249-5438

To Whom It May Concern:

I hereby verify that _____
First name Last name

is current on all immunizations _____ (please use a check mark) as of _____
Current date

OR

is in need of the following immunization(s). (Please include the time lines needed to be followed):

Signed by: _____

Date: _____

Position: _____