



FREDERICKTOWN COMMUNITY

JOINT EMERGENCY AMBULANCE DISTRICT

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These forms are kept by Fredericktown EMS in an effort to provide better care to special needs patients. The accuracy of the information on these forms is the responsibility of the person completing them. Persons completing these forms release Fredericktown EMS from liability for relying upon information supplied on the forms.

Date forms filled out

Printed full name of person completing forms

Signature of person completing forms