Please complete this 2-page form with your information and the information of where you want the records to go or come from.

Please do not check every box unless it applies to you. Please sign and date the 2nd page.

Please indicate somewhere on the form if you have an appointment coming up. I will do my best to get the records there in time or retrieve records for your appointment here.

You can send this form back to me via MyChart (if you have that capability) my email, listed below or to medicalrecords@morelandobgyn.com

Any questions, please contact me.... thank you!

Kelly Jacobson Health Information Manager 1111 Delafield St Ste 120 Waukesha, WI 53188 P/262-544-4411 ext. 4143 kelly.jacobson@morelandobgyn.com