

Blood Screening Participation and Preventative Wellness Physical

1. Participated in the Blood Screening for 2021 Incentive

Date _____

2. Preventative Wellness Physical for 2021 Incentive

Date_____ EOB attached (explanation of benefits)

I understand by completing the blood screening and Preventative Physical this will be part of my 2021 employee & spouse health insurance contribution requirement.

Name_____

Department _____

****The Physical must be completed no later than November 13, 2020 and this form must be returned to your department head/elected official as soon as completed.****

Department head/elected official – please return these forms to Louise as soon as received, do not hold them until all are turned in if possible – due to the fact that some may decide not to participate