



*UPP Department of Neurology  
 Kaufmann Medical Building  
 3471 Fifth Avenue, Suite 810, Pittsburgh, PA 15213  
 Telephone (412)692-4920 Fax (412)692-4907*

Our form fee charges are listed below. Please understand that due to the volume of forms we receive, it can take us up to 4 weeks from receipt of this form for form completion. If you would like us to complete your forms, print and complete this page, enclose your check and the disability form and mail to the address above to your physicians attention. You must also enclose a completed release of information page. (see example). If we receive a form by fax directly from the disability company, we will mail this request to you before we will complete the form.

Patient Name: \_\_\_\_\_ DOB \_\_\_\_\_

Physician: \_\_\_\_\_

Todays Date: \_\_\_\_\_

Disability Form Fee 10.00 per each page ( if 2 sided form cost is 20.00 per page)  
**FMLA form fee charge is 20.00 total unless it is a single page**

Payment Type:

- Cash
- Check

*Please make checks payable to ‘UPP Department of Neurology’* TOTAL DUE \_\_\_\_\_

Please be sure that you:

- Completed this form
- Include a completed and signed Authorization Release of Information Form
- Include your payment for each form or letter that you are requesting

**Internal Use Only:**

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