

APPOINTMENT PROGRAM FOR

M _____

ROBERT SMITH, D.C.

2818 E. HAMILTON AVENUE
FRESNO, CALIFORNIA 93721
(559) 227-7640
FAX (559) 237-4929

DAY _____ DATE _____ TIME _____

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NO CHARGE WILL BE MADE IF 24
HOURS NOTICE IS GIVEN FOR MAKING
ALTERNATE APPOINTMENT