

FRONT OF PAP CARD

Your PAP test result will be mailed to you.

Please fill out just the top portion on this card, please print legibly.

Name *(Last)* *(First)* *(Initial)*

Address

City State Zip Phone

Sponsor Rate/Rank

Provider seen today

(Clinic Copy)

Perforated line

**DEPARTMENT OF THE NAVY
COMMANDING OFFICER
NAVAL HOSPITAL OAK HARBOR CODE 04F4GY
3475 N SARATOGA STREET
OAK HARBOR WA 98277**

OFFICIAL BUSINESS

